

Republic of Zambia

COVID-19 Guidelines for Schools

Ministry of General Education

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FORWARD

The Government of the Republic of Zambia recognized the critical role that education plays in the human capital formation. This therefore calls for investing in the people through education to ensure job creation and socio-economic transformation by providing relevant quality education.

The Ministry's mandate in the provision of quality education transcends all situations including the COVID-19 pandemic.

It is in light of this predicament that the Ministry of General Education, working in partnership with other stakeholders, remains committed to putting up measures to ensure the continuity of learning. One such measure is the development of the COVID-19 guidelines aimed at creating a safe school environment ahead of the re-opening of schools on 1st June 2020 as directed by the Republican President, His Excellency, Dr. Edgar Chagwa Lungu.

It should be noted that the development of the COVID-19 guidelines is part of the collaborative efforts among the Ministry partners in ensuring that schools provide safe learning environment, so that learners, teachers, and other school staff are not at risk during the provision of education.

The focus of the guidelines is anchored on the measures as guided by the Ministry of Health and frameworks from the WHO, UNICEF and UNESCO for re-opening schools.

HON DAVID MABUMBA (MP) MINISTER OF GENERAL EDUCATION

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Jobbicks Kalumba (Dr.) Permanent Secretary-Technical Services MINISTRY OF GENERAL EDUCATION

LIST OF ACRONYMS AND ABBREVIATIONS

DEBS	District Education Board Secretary
DHO	District Health Office
ECD	Early Childhood Development
ECE	Early Childhood Education
EHT	Environmental Health Technologist
HIV	Human Immunodeficiency Virus
IEC	Information Education Communication
MOGE	Ministry of General Education
МОН	Ministry of Health
MOT	Modes of Transmission
NGO	Non-Governmental Organisation
NPI	Non-Pharmaceutical Intervention
PPE	Personal Protective Equipment
PTC	Parent Teacher Committee
SADC	Southern Africa Development Community
SARS	Severe Acute Respiratory Syndrome
SHN	School Health and Nutrition
WHO	World Health Organisation

1. INTRODUCTION

The world is currently in the midst of the worst public health crisis in over a century. As of mid-May 2020, more than four million people have tested positive for COVID-19 globally and over 300,000 people have died from the disease.

The virus emerged in China in late 2019, before making its way to Europe and the United States in early 2020. The first case of COVID-19 was confirmed in Africa in February of 2020. In response, Governments throughout the region implemented a series of public health containment efforts designed to slow its spread, often called "non-pharmaceutical interventions" or NPIs. This included closing schools, churches, and non-essential businesses. Countries around the world are racing to develop treatments and a vaccine to combat COVID-19. However, there is currently neither an effective treatment nor a vaccine for the disease.

COVID-19 cases are on the rise in the Southern Africa Development Community (SADC) region, with Zambia and its neighbours registering new cases every day. However, transmission trends from the months of March and April, as well as encouraging recovery rates, have led Governments to initiate the opening of economies and the return of life to a "new normal". His Excellency the President of the Republic of Zambia Dr. Edgar Chagwa Lungu issued a directive on Friday the 8th of May 2020 that Zambia would initiate the reopening of its economy, including for schools to open on the First of June 2020 for learners in examination grades 7, 9, and 12.

The decision to re-open schools is one that is made by the Government, considering the risk to public health posed by COVID-19 as well as the consequences of learners (particularly the poor and vulnerable) being out of school for an extended period of time. As a COVID-19 vaccine may not be available soon, it is critical for schools to mitigate potential risks related to COVID-19. Thus, it is the mandate of the Ministry of General Education in collaboration with the Ministry of Health, to ensure that schools can open conditional to strict adherence to public health measures.

The protection of learners, teachers, and others is of paramount importance. Precautions are necessary to prevent the potential spread of COVID-19 in school settings, and care must also be taken to avoid stigmatizing learners and staff who may have been exposed to the virus. It is important to remember that COVID-19 does not differentiate between borders, ethnicities, disability status, age, or gender. Education settings should continue to be welcoming, respectful, inclusive, and supportive environments to all.

These guidelines outline protective measures schools should take to minimize the risk posed by COVID-19 to their staff, learners and communities. The recommendations made in this document will be reviewed regularly and updated in accordance with Ministry of Health policy and global best practices, to ensure that they align with new information on COVID-19 and evolving national guidelines.

1.1 Rationale

Teachers, school administrators, parents, and health facility partners are essential to the delivery of school-based health services in Zambia. National guidance is needed to define their role in the national response to COVID-19 in order to safely open and manage schools, and to maintain the delivery of high quality education while minimizing the risk of spreading the disease. Our aim is to ensure a coordinated and consistent approach to managing and reducing the threat of COVID-19 in schools.

The purpose of this document is to provide clear and actionable guidance for safe operations through the prevention, early detection, and control of COVID-19 in schools and other educational facilities. Through school-based education about COVID-19, learners can become advocates for disease prevention and control at home, in school, and in their community by talking to others about how to prevent the spread of viruses. Maintaining safe school operations and reopening schools after closure requires many considerations but, if done well, can promote effective public health.

1.2 Objectives

The objectives of the COVID-19 guidelines are to:

- I. Guide provincial education offices, district education offices and administrators of primary and secondary schools on measures for preventing the spread of COVID-19 among learners, teachers, support staff and parents/guardians;
- II. Promote and sustain a safe and healthy learning environment;
- III. Help schools to understand and follow measures for managing suspected and confirmed cases of COVID-19;
- IV. Promote capacity building among stakeholders on the implementation of the COVID-19 prevention and control provisions as well as other school health activities; and
- Improve collaboration among line Ministries in planning and implementation of COVID-19 prevention and control provisions in schools.

1.3 Intended Users

This document is intended for line ministries, district education board offices, school administrators, teachers, parent-teacher committees, learners, parents/guardians, and partners supporting health and education programmes.

1.4 Beneficiaries

The intended beneficiaries of these guidelines are school administrators, teachers, support staff, learners, parent teacher committees and the community at large. Sharing information and promoting public health in learning institutions has direct positive spill-over effects in the communities that schools serve. Keeping learners and school staff healthy and equipping them with health information enables them to share knowledge with their communities. This helps to

prevent the spread of COVID-19 and reduces the possibility of schools becoming potential hotspots.

1.5 Action Plan

Each school is required to develop a COVID-19 Action Plan for the implementation of these guidelines. It is the responsibility of school administration, with the support and supervision of the District Education Office, to develop the plan. The plan should be tailored for local needs and conditions and developed jointly with relevant stakeholders (e.g. school administrators, SHN teachers and other school staff, parent teacher committees, learners and the local health facility). The COVID-19 Action Plan should address the *who, what, when,* and *where* of the implementation and management of the guidelines. The plan should include provisions for short-term closure and reopening following a confirmed case of COVID-19 at the school in accordance with MOH protocols. The school should continuously monitor performance against the guidelines and update the plan accordingly to ensure compliance.

1.6 Resource Mobilization

Effective implementation of these guidelines requires a multi-sectorial approach and the collaboration of government ministries, multi-lateral and bi-lateral partners, NGOs, the private sector and other stakeholders. Internal and external resources can be sourced through the existing system and procedures. A school may also wish to use leadership from various organisations but only through established structures and mechanisms. Additional resources raised should be accounted for within the normal Government procedures. Therefore, accountability, transparency and other internal controls need to be developed to safeguard these resources. Sourced funds and materials will become public resources and will be audited as such.

2. SITUATIONAL ANALYSIS

COVID-19 was declared a pandemic by the World Health Organization (WHO) on 11 March 2020. Zambia recorded its first confirmed COVID-19 cases on 18 March 2020. To mitigate the spread of the virus, the government announced the closure of all schools, colleges and universities on 20 March 2020, three weeks before the scheduled end of the first term.

The closure of schools has resulted in the loss of learning time and disruption of the academic calendar. In an effort to mitigate this and provide learners with other learning options, the Ministry of General Education developed a distance learning model that uses radio, television, and digital media. Despite these efforts, distance learning has presented a series of challenges related to access, especially for low-income learners and those in rural areas who do not have access to the technology required for distance learning to take place. On 8 May 2020, the President of Zambia issued a directive to have schools open for examination classes on 1 June 2020. As a result, these guidelines have been developed and should be used together with the School Health and Nutrition Guidelines and other Government documents. The effective

implementation of this guiding document is critical as schools join the front line of COVID-19 control and prevention efforts in Zambia.

Learner Population

Currently, Zambia has a total of more than 4.5 million learners, of which less than 1.14 million learners are currently in examination grades, as shown below:

Sn	Grade Level	Number of Learners
1	Grade 7	466,000
2	Grade 9 internal	285,000
3	Grade 9 external	127,000
4	Grade 12 internal	150,000
5	Grade 12 GCE	113,000
	Total	1,141,000

3. BACKGROUND ON COVID-19

3.1 What is COVID-19?

Coronavirus Disease or COVID-19 is a disease caused by a new coronavirus that was discovered in China in late 2019. 'CO' stands for corona, 'VI' for virus, and 'D' for disease. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases.

3.2 Symptoms of COVID-19

Symptoms can range from mild to severe which include fever, cough, shortness of breath, body pains, sore throat, new loss of taste or smell and tiredness. In more severe cases, infection can lead to complication like pneumonia (infection of the lungs) and kidney failure. More rarely, the disease can lead to death. COVID-19 symptoms are similar to the flu (influenza) or the common cold. This is why testing is required to confirm if someone has COVID-19. Some infected individuals may not show symptoms, but they can still spread the virus.

3.3 How COVID-19 spreads

The virus is transmitted through direct contact with respiratory droplets of an infected person (generated through coughing and sneezing). Individuals can also be infected from touching surfaces contaminated with the virus and then touching their face (e.g., eyes, nose, mouth). There is currently no evidence to support transmission of COVID-19 associated with food. The COVID-19 virus may survive on surfaces for several hours, but disinfectants can kill it.

3.4 Who is most at risk

Everyone is at risk of contracting the coronavirus. Older people—especially those above 60 years of age—and people with chronic medical conditions, such as high blood pressure, diabetes, heart disease, obesity and TB, are at greater risk of developing severe COVID-19 illness and even death. While children tend to have milder symptoms than adults, they can still develop severe illness. As this is a new virus, we are continuing to learn more about it.

3.5 How to prevent the spread of COVID-19

As with other respiratory infections like the flu or the common cold, adherence to public health measures is critical to slow the spread of the disease. Public health measures to prevent the spread of COVID-19 include:

- Staying home
 - When sick (call the helpline)
 - Avoid unnecessary or non-essential movements
- Adhering to physical distancing guidelines (keeping 1-2m distance away from others)
- Covering mouth and nose with flexed elbow or tissue when coughing or sneezing; used tissue should be disposed off properly (in the pit latrine or toilet).
- Washing hands often with soap and water for at least 20 seconds or use an alcoholbased hand sanitiser (at least 70% alcohol content), do not dilute it
- Wearing face masks in public, including when using public transport
- Cleaning and disinfecting frequently touched surfaces and objects, including desks, tables, floors, and doorknobs

Schools must adhere to any new measures recommended by the Ministry of Health on the prevention of COVID-19.

4. SCHOOL HEALTH SERVICE PROVIDERS

The School Health service providers include teachers, members of the parent-teacher committees, district health officers and health workers (e.g., Clinical Officers, Medical Officers, Nurses, Environmental Health Technologists (EHTs), Health Promotion Officers and community based health workers or volunteers). It is the responsibility of the Head Teacher at each school, through the School Health and Nutrition (SHN) Teachers or SHN committee, and under the supervision of the District Education Board Office, to ensure that all COVID-19 prevention and control guidelines are effectively implemented.

5. ROLES AND RESPONSIBILITIES OF STAKEHOLDERS

Implementation of the guidelines requires a multi-sectoral approach that includes the Ministries of General Education, Health, Community Development & Social Services, Local Government, Water Development Sanitation and Environmental Protection as well as other Non-Governmental Organizations, cooperating partners and the community. The roles and responsibilities of stakeholders at the national, provincial, district, and school levels include:

National Level	Roles and responsibilities		
Line Ministries	 Provide policy guidance for school operations. Periodically review existing policy guidelines relating to COVID-19 prevention and control provisions; Mobilize and allocate resources for the implementation of COVID-19 prevention and control provisions, health services, and other SHN activities; Conduct budget tracking to ensure effective resource utilization; Coordinate and ensure linkages with other line Ministries including the Ministries of Health, Water and Sanitation, Local Government, Community Development and Social Welfare as well as all other local or international partners; and Monitor and provide technical support in the implementation of the COVID- 19 prevention and control provisions and related health activities in the country. 		
Provincial level	Roles and responsibilities		
I. Plan, budget, and monitor financial and other resources to ensure e allocation of resources; II. Develop and implement a provincial COVID-19 Action Plan and sup supervise the development of COVID-19 Action Plans for districts; III. Coordinate COVID-19 prevention and control provisions and related activities in the province; IV. Conduct ongoing monitoring of COVID-19 prevention and control provision and related health activities; and V. Ensure districts adhere to set guidelines and standards.			
District level	Roles and responsibilities		
DEBS	 Coordinate COVID-19 prevention and control provisions and related health activities in the district; Orient and train school administrators and SHN teachers (or SHN committees) on the implementation of COVID-19 guidelines; Develop and implement a district COVID-19 Action Plan and support and supervise the development of COVID-19 Action Plans for schools; Ongoing engagement of the District Health Office and other line ministries to support the implementation of the COVID-19 guidelines; 		

	 V. Allocate resources and material support for the implementation of the guidelines;
	 VI. Conduct ongoing monitoring of COVID-19 prevention and control provisions and related school health activities within the district to ensure compliance;
	VII. Provide technical support and remedial action for schools on complying with the guidelines; and
	VIII. Promote learner motivation and address disinterment in learning and the risk of dropping out within the district.
	I. Conduct district budget tracking to ensure effective resource allocation;
	 Support schools to implement COVID-19 prevention and control provisions according to set designs, guidelines, and approved standards;
	III. Coordinate COVID-19 prevention and control provisions and related health activities in the district;
Line Ministries	IV. Conduct ongoing monitoring of COVID-19 prevention and control provisions and provide remedial action to ensure school adherence to guidelines; and
	 V. Monitor school infrastructure to ensure <i>equitable</i> provision of an environment that meets physical distancing and sanitation requirements and is conducive to teaching and learning.
School Community	Roles and responsibilities
	I. Develop and implement a COVID-19 Action Plan;
	II. Orient teachers, support staff, learners and parents/guardians on the COVID-19 guidelines;
	III. Ensure that COVID-19 prevention and control guidelines are followed by teachers and learners;
	IV. Coordinate, oversee, and plan school-level COVID-19 prevention and control provisions and related health activities;
	V. Participate in COVID-19 prevention and control activities;
	VI. Assign staff members to specific COVID-19 prevention and control provisions and related health activities in the school;
School Administration	VII. Promote the active support of the entire school community for COVID-19 prevention and control activities;
	VIII. Promote WASHE in the school environment; provision of water, sanitation and hygiene facilities;
	IX. Supervise and support teachers, learners, and other school staff in the implementation of COVID-19 prevention and control activities;
	X. Ensure that IEC materials are available on COVID-19 and related topics;
	XI. Engage with Parent Teacher Committee to ensure that communities are aware and knowledgeable about COVID-19 and that prevention and control guidelines are followed by parents/guardians and learners;
	XII. Provide reports and information on activities to district offices through appropriate channels;

	 XIII. Ensure the continuation of SHN activities in accordance with prevailing guidelines;
	XIV. Maintain updated contact details of learners and their guardians to health with contact tracing;
	XV. Identify and respond to learners at risk of exclusion and not returning to school following reopening; and
	XVI. Follow up on all reported absent learners.
	I. Ensure adherence to COVID-19 prevention and control guidelines;
SHN Teachers /	II. Support the head teacher in organizing COVID-19 prevention and control provisions and other school health activities;
SHN Committees	III. Implement COVID-19 prevention and control activities; and
Commuces	IV. Train and support fellow staff on how to effectively integrate COVID-19 prevention and control activities into their teaching.
	 Identify sick learners, isolate them and inform relevant health authorities (call the COVID-19 helpline 909);
	Implement COVID-19 prevention and control activities;
Teachers	III. Ensure the effective implementation of school health activities in accordance with prevailing guidelines;
	IV. Monitor classroom attendance and report absenteeism to the Head Teacher;
	V. Monitor the health of learners and identify unwell learners.
	I. Immediately notify school authorities if there is a sick learner;
	II. Actively participate in COVID-19 prevention and control provisions;
Learners	III. Participate in 'buddy groups' (peers or best friends) to help look after the health and wellbeing of other learners in their class;
	IV. Promote healthy behaviours among peers; and
	 V. Learn key messages during school health activities and share with peers, their siblings, friends and parents/guardians.
	I. Adhere to COVID-19 prevention and control guidelines;
	II. Support the implementation of COVID-19 prevention and control guidelines and related health activities;
Parent Teacher	III. Engage other parents in adhering to guidelines;
Committees	IV. Provide security and maintenance of school health materials and resources;
(PTCs)	 Ensure transparency and accountability in the utilization of school health materials and resources; and
	VI. Sensitize the community on COVID-19 prevention and control guidelines and the importance of school health.
	I. Provide technical support and mentorship to school staff;
Health Workers	II. Identify sick leaners, isolate those with suspected COVID-19 symptoms and call the helpline.

.	Implement the fast-track referral system for learners referred to the health facility from the school;
IV.	Support health monitoring and contact tracing activities; and
V.	Monitor implementation of guidelines and conduct routine inspections of school premises, including water and sanitation quality monitoring.

6. KEY MEASURES AND ACTIONS TO PREVENT SPREAD OF COVID-19 IN SCHOOLS

Adherence to prevention and control principles can help keep learners, teachers, and other staff (custodial, food handlers, etc.) safe at school and help stop the spread of COVID-19.

The following shall be observed to prevent the spread of COVID-19 in schools and surrounding communities.

6.1 Physical Distancing

Physical distancing, also called "social distancing," refers to maintaining physical distance between people to prevent the spread of disease. **Physical distancing is a key measure to prevent the spread of COVID-19 and should be practised preventively.** Schools should promote and adhere to physical distancing through the following measures:

- Teachers, learners, and other school staff should stay home if they are not feeling well.
- To the extent possible, limit class size to avoid overcrowding and maintain at least 1 metre of space between learners; schools can use outdoor space to accommodate this requirement or use more classrooms than the normal.
- Maintain at least 1 metre between school staff and learners.
- Observe physical distancing in shared staff spaces; teachers and other school staff should avoid congregating indoors in groups larger than 5 people where possible.
- Vendors should be prohibited from selling on or near school grounds.
- Learners should only buy food from the school Tuck Shop, while maintaining physical distancing and hygiene practices.
- Staff, PTCs and other essential school meetings should maintain physical distance of at least 1 metre between participants during staff meetings; meetings should last no longer than 1 hour; all individuals must wear face masks at all times; virtual meetings should be encouraged and information should be shared electronically via email or WhatsApp when possible.
- Teachers, learners and other school staff who arrive at school with fever, cough or other common symptoms of COVID-19, or develop those symptoms during the school day, should be isolated immediately from their peers and colleagues.
- Outside visitors and unauthorized guests shall be limited to the greatest reasonable extent.
- There shall be no outside visitors to boarding schools.

- Where necessary, a single parent/guardian should drop off and/or pick up learners from school at a designated school entrance.
- Arrival and departure times of learners should be staggered to avoid crowding at entrances
- School areas should be monitored to ensure physical distancing is adhered to while learners enter and leave the school.
- Physical contact, such as hugging or shaking hands, should be avoided.
- Classroom breaks should be staggered to avoid crowds of learners.
- Large gatherings such as school assemblies; sporting events; or PTC meetings should be avoided
- Teachers and learners should be encouraged to walk or cycle to school to minimise physical contact in public transport.
- Teachers and learners should adhere to public health guidance from the Ministry of Health such as avoiding crowds or gatherings and non-essential movements.
- In boarding schools, beds should be positioned at least 2 metres apart; bunk beds should only hold one occupant.
- Dining rooms should have markings for physical distancing of learners at 1 metre apart
- To the extent possible, boarding schools should restrict the movement of learners outside of the school boundary.

6.2 Use of Face Masks

It is a requirement that all learners, teachers, and all other members of staff, as well as anyone entering the school premises, wear face masks. Schools shall ensure the following:

- Learners, teachers, other members of staff, and all the people entering the school premises must wear face masks;
- Maintain a stock of face masks to support vulnerable learners; (Schools with the capacity to make face masks through Home Economics department should do so and supply to the needy at no cost).
- No sharing or exchanging of face masks;
- No unnecessary touching of face masks; and
- Remind learners to wash their personal cloth face masks after daily use with detergents and sun-dry. Disposable masks should only be used once.

How to use the face mask

Follow the guidelines below for proper use of face masks:

- Before putting on a face mask, wash your hands with soap and water or use alcohol-based hand sanitizer.
- Cover mouth and nose with face mask and make sure there are no gaps between your face and the mask.
- Avoid touching the face mask while using it; if you do, clean your hands with soap and water or alcohol based hand sanitizer.
- Replace face mask with a new one as soon as it is damp or visibly soiled.

- A disposable face mask can only be used once and should be discarded immediately in a closed bin.
- Remove face mask from behind (do not touch the front of mask).
- Face mask should NOT be shared between two people.

6.3 Sanitation and Hygiene

Routine cleaning of classrooms and shared spaces will help prevent the spread of COVID-19 and keep learners, teachers, and other school staff safe. Schools shall:

- Have hand-washing stations or alcohol-based hand sanitizer dispensers available at school entrances, classrooms, dining rooms/halls, dormitories and ablution blocks.
- Have all learners and staff wash their hands with soap and water for at least 20 seconds or rub with alcohol-based hand sanitizer before entering the school and classroom.
- Regularly monitor handwashing stations to ensure they are adequately equipped with clean water and soap and that hand sanitizer dispensers are refilled.
- Clean classrooms, offices, public spaces and water and sanitation facilities (toilets) at least twice a day with a suitable disinfectant based on prevailing guidelines.
- In boarding schools, clean sleeping areas at least once a day with a suitable disinfectant based on prevailing guidelines.
- Sanitize desks, chalkboards, and other frequently touched surfaces after every class stream.
- Kitchen and shared eating areas should be disinfected regularly, a minimum of once per day and once after meals.
- All food handlers must have medical certification.
- Ensure learners do not share supplies (pens, notebooks, toys, etc.); items that are used by more than one person shall be regularly sanitized.
- Remove trash daily and dispose it safely.
- Ensure surrounding areas of the school are kept clean at all times.
- Thoroughly disinfect classroom and common spaces every time there is a suspected or confirmed case of COVID-19.
- Encourage learners and teachers to wash their hands regularly or use alcohol-based hand sanitisers.
- Require teachers to wash their hands before and after marking books and handling any other materials from learners.
- Avoid unnecessary use of gloves, as they can be a source of infection if handled poorly.

Teachers should also practice and educate learners on other preventive measures, including:

- Practising proper respiratory hygiene: covering mouth with a flexed elbow when coughing or sneezing, or coughing into a tissue and immediately disposing of it in a toilet or pit latrine.
- Avoiding touching mouth, nose or eyes with hands.

- Avoiding physical contact such as shaking hands or hugging; finding alternative ways to greet others (e.g., waving and bowing).
- Keeping surfaces and personal objects clean (i.e. mobile phones, pens and pencils etc.).

6.4 Targeted Health Education

Schools should integrate COVID-19 prevention and control in daily activities and lessons. Schools shall:

- Integrate health education activities into existing subjects.
- Ensure content is age-, gender-, and disability-responsive and that messages are endorsed by the Ministry of Health.
- Provide learners with at least one health education talk per day.
- Maintain regular communication with health staff to receive up to date COVID-19 information.
- Provide psycho-social support through the guidance and counselling office and other service providers.
- Encourage learners to discuss their questions and concerns; teachers should explain to learners that it is normal that they may experience different reactions to the crisis.
- Guide learners on how to support their peers and prevent stigma, exclusion and bullying.
- Ensure teachers are aware of local resources for their own well-being.
- Distribute and prominently display MOH-endorsed messages on COVID-19 through information, education, and communication (IEC) materials.

7. HEALTH MONITORING AND DISEASE MANAGEMENT

Health monitoring and disease management are essential components in preventing the spread of COVID-19, as they enable schools and communities to effectively identify and respond to sick learners. Each school should regularly monitor the health of its staff and learners on a daily basis. These guidelines support the monitoring learner and staff health and the isolation, management and reporting of suspected COVID-19 cases.

7.1. Health Monitoring

Working closely with the nearest health facility, schools shall implement the following to monitor the health of teachers, learners and other school staff:

- To the extent possible, schools should measure the temperature of learners, teachers, and other school staff and any visitors upon arrival at the designated school entry point. Teachers, learners, and other school staff arriving at school found to have a fever (Temperature of above 38.0°C) should be isolated from peers and contact the health helpline and arrangements made for the them to receive appropriate care.
- Teachers should start all classes by asking if any learners feel sick. Learners who report feeling unwell should be sent to the health room or other designated space to be assessed.

- Schools should amplify absenteeism monitoring through following up on absent learners by calling their parents or guardians.
- Schools should encourage parents or guardians to inform school and health care authorities if anyone at home has COVID-19 symptoms, and or has been a contact to a COVID-19 patient.
- Schools should alert health authorities of noticeable attendance changes.
- School Management should also encourage a buddy-system in the school where staff and learners check on each other and report to the school authority when someone in their group is not well.

7.2. Disease Management

Teachers, learners, and other school staff should stay home if they're not feeling well and be advised to call the health helpline and follow applicable Ministry of Health protocols. If a learner is found to be sick at school, then the following guidance should be observed:

- Schools should have a designated health room (sick bay) or other applicable space to isolate sick learners and school staff away from others while arranging for medical help.¹
- Teachers, learners, and other school staff arriving at school found to have a fever (Temperature above 38.0°C) should be isolated from peers and contact the health helpline immediately and arrangements made for the them to receive appropriate care.
- Teachers, learners, and other school staff found to be unwell at school should be separated from peers and sent to the health room (sick bay) or other applicable space for assessment. Schools should contact the health helpline immediately.
- If learners present with signs consistent with severe COVID-19 illness, or other serious respiratory symptoms, the school should isolate the learner and call the health helpline immediately and arrangements made for the them to receive appropriate care.
- Learners, teachers and parents/guardians who are sick should be advised to observe prevailing public health protocols and follow Ministry of Health advice.
- Schools should observe Ministry of Health best practices related to self-isolation for people with underlying health conditions.

8. SUSTAINING EXISTING SCHOOL SERVICES

For the duration of the COVID-19 pandemic, it is critical for schools to continue providing (when possible) the school-based health services as stipulated in the Ministry of General Education's *School Health and Nutrition Guidelines*. This includes such primary health services as deworming and vitamin A supplementation.

Schools should implement activities to promote the return of all children to school (i.e. communication campaign, incentives for vulnerable children or reintegration of pregnant girls etc.). Particular attention must be given to already vulnerable groups, who may face added risks

¹ School should contact the health helpline, local health facility, District Health Office or other health authority to seek additional information and advice on locally available resources.

due to both COVID-19 and the prevention and containment efforts. Schools should strengthen collaboration with local health facilities and social welfare service providers to ensure that essential services are not interrupted for learners, including adequate health and nutrition. Consideration must also be given to school-aged girls who may face disproportionate risk due to their role as primary and supplementary caregivers for sick siblings and elderly family members. School administrators should work with teachers to identify at-risk learners, so appropriate response protocols can be followed.

School administrators and teachers should also collaborate to ensure the ongoing provision of comprehensive health education for learners to promote healthy behaviours. This should include age appropriate messages about: diarrheal diseases, bilharzia, malaria, tuberculosis, sexual and reproductive health, and gender-based violence, among others.

9.COMPLIANCE AND MINIMUM STANDARDS

Teachers and school administrators should use the checklist (see Appendix A) daily to ensure they are adhering to the guidelines outlined in this document. The checklist consists of standards that need to be present to ensure that the guidelines are effectively implemented and for learners and school staff to remain safe. Overall compliance at the school level shall be monitored by the school administration, SHN teacher, or another designated individual. It is the responsibility of the School Administration, under the supervision of the District Education Board Office, to ensure that the compliance standards are met.

The district shall use the checklist to monitor compliance at school and provide feedback and recommendations. The District Education Board Office will aggregate data to provide the province with information on district-wide compliance. The government shall set thresholds for the closure and opening of individual schools and districts based on compliance.

10. MONITORING AND EVALUATION

In order to ensure effective implementation and compliance to COVID-19 measures and guidelines at various levels such as PEO, DEBS and schools, regular monitoring and evaluation will be conducted. This will be done through a multi-sectoral approach by involving a variety of stakeholders within and outside the MoGE. Stakeholders such as teachers, school administrators, Standards Officers, other MoGE Officials, Officers from line Ministries, cooperating partners (CPs) and NGOs will participate in monitoring the implementation of the guidelines at various levels of the education system.

Recommendations based on the findings will be raised and school administrators appraised to improve compliance levels in their institutions. It should be noted that because COVID-19 is a pandemic, regular monitoring and reporting of the indicators is of paramount importance. This type of monitoring will also assess the practical aspect of some of the guidelines at institutional level and provide opportunities for monitors to make amends where necessary.

11. TECHNICAL TERMS

Buddy Group: Learners are assigned into small groups of 3-5 to promote healthy behaviours and monitor the health of their peers. Learners are to inform a SHN teacher when a member of the group is unwell or needs support. Teachers may use the buddy groups to follow-up and obtain information on learners absent from class.

Bullying: School place bullying is repeated inappropriate behaviour, direct or indirect, whether verbal, physical or otherwise, conducted by one or more persons against another or others, at the place of learning and/or during learning. An isolated incident of the behaviour described in this definition may be an affront to dignity at school but as a once off incident, is not considered to be bullying.

COVID-19: COVID-19 is a disease caused by a new coronavirus, which is an abbreviated form of coronavirus disease, identified in the year 2019. Its causes respiratory illnesses.

Deworming: The treatment given to learners to get rid of intestinal worms. Deworming treatment is to be provided to the learners by the school twice per year in accordance with prevailing guidelines.

Evaluation: Evaluation is the systematic and objective assessment of the design, implementation and results of an ongoing or completed project, programme, or policy.

Health Room: A designated room at the school for SHN activities. The room should be equipped to properly manage sick learners, providing first-aid and oral rehydration salts, and conduct basic assessments of unwell learners as necessary. Schools shall develop a timetable to ensure that there is at least one SHN teacher on duty within the health room at all times.

Monitoring: Monitoring is the systematic and objective checking on whether project or programme implementation meets standards as defined by the project document.

School Health Teachers: Class teachers trained and certified in school health and nutrition. SHN teachers support the implementation of SHN activities and guidelines, which include, but are not limited to, monitoring the health of learners, identifying and assessing sick learners, making referrals from the school to the health facility, providing basic first aid treatment, distributing mass drug administration and providing health promotion education. A school should have one trained SHN teacher for every 300 learners enrolled.

Social Distancing: Social distancing, also called "physical distancing," refers to maintaining physical distance between people to prevent the spread of disease. Physical distancing is a key measure to prevent the spread of COVID-19.

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APPENDIX A: SCHOOL COMPLIANCE CHECK-LIST

	Compliant	Semi- compliant	Non- compliant
HUMAN RESOURCES		• –	• –
Teachers and other school staff trained on COVID-19 guidelines and actively implement their roles and			
responsibilities			
Learners oriented on COVID-19 guidelines and reminded of guidance regularly			
School have active School Health and Nutrition (SHN) Teachers or SHN Committee			
PHYSICAL DISTANCING			
Limit class size to maintain 1-2 metres of space between learners			
No more than 2 learners are seated on each desk			
2 metres of space is maintained between teachers and learners			
System in place for learners to submit papers, exams and other assignments while maintaining physical			
distancing of 1-2 metres			
Physical distancing is monitored and adhered to while learners enter, exit and move around the school			
Physical distancing of at least 1-2 metres is observed in public spaces and school grounds			
Classroom breaks are staggered to avoid crowds of learners			
		1	1
Other than essential staff meetings, teachers do not congregate indoors in groups larger than 5 people			
Staff, PTCs and other essential school meetings last no longer than 1 hour and physical distancing of at least 1			
metre is maintained; all individuals wear face masks at all times.			
Information is shared electronically via email, WhatsApp or other means with school staff where possible			
No large gatherings (e.g. school assemblies; sporting event; PTC meetings) where physical distancing of at			
least 1 metre cannot be maintained			
No unauthorized guests allowed to enter the school premises			
There is a designated drop off or pick up point outside of the school entrance for parents and guardians			
Vendors are prohibited from selling on or near school premises			
Only one parent/guardian drops off or picks up their learner(s) from school			
Schedule in place for staggering arrival and departure times of learners to avoid crowding near entrances			
School eating areas have markings for physical distancing of learners of 1 metre apart.			
Learners and school staff are reminded regularly that physical contact, such as hugging or shaking hands is prohibited			
In boarding schools, beds are positioned at least 2 metres apart			
In boarding schools, bunker beds hold only one occupant			
To the extent possible, boarding schools restrict the movement of learners outside of the school boundary.			

	Compliant	Semi- compliant	Non- compliant
FACE MASKS		_	-
All teachers and other school staff wear face masks at all times while at school			
All learners wear face masks at all times while at school			
The school has a readily available stock of face masks for vulnerable learners			
All disposable face masks are disposed of properly in a closed bin according to health guidelines			
HEALTH ROOM			
School has a health room (sick bay) or other designated space for isolating sick learners and teachers			
The health room or other designated space is cleaned and disinfected at least twice per day			
SANITATION AND HYGIENE			
School has continuous access to safe water			
Hand-washing stations or alcohol-based hand sanitizer dispensers are available at school entrances			
Hand-washing stations or alcohol-based hand sanitizer dispensers are available outside all ablution blocks			
Hand-washing stations or alcohol-based hand sanitizer dispensers are available outside classrooms			
System is in place for monitoring handwashing stations to ensure availability of clean water and soap and that			
alcohol-based hand sanitizer dispensers are re-filled			
Learners and school staff wash their hands with soap and water or rub hands with alcohol-based hand			
sanitizer before entering the school			
Learners and school staff wash their hands with soap and water or rub hands with alcohol-based hand sanitizer before entering a classroom			
Teachers wash their hands with soap and water or rub hands with alcohol- based hand sanitizer before and after marking or handling papers and other materials used by learners			
Learners and teachers are encouraged to wash their hands regularly (i.e. after using ablution blocks, before and after eating, after sneezing or coughing, after touching frequently used objects such as door handles etc.)			
Classrooms, offices, and water and sanitation facilities (toilets) are cleaned at least twice per day with a suitable disinfectant based on prevailing guidelines			
Kitchen and shared eating areas are disinfected a minimum of once per day and once after meals			
In boarding schools, sleeping areas are cleaned at least once a day with a suitable disinfectant			
Desks, chalkboards, and other frequently touched surfaces and objects are sanitized after every class stream			
Learners are prohibited from sharing supplies (i.e. pens, notebooks, toys etc.)			
Items that are used by more than one person are sanitized after each use			
Classroom and common spaces are thoroughly disinfected every time there is a suspected or confirmed case of COVID-19			

	Compliant	Semi- compliant	Non- compliant
Classroom windows and doors are kept open while classes are in session		•	•
Trash is removed daily and disposed of safely			
School surroundings are kept clean at all times			
HEALTH EDUCATION			
Health education activities are integrated into existing subjects			
There is a time table in place for providing learners with health education			
All health education messages are approved by the government and are content, age-, gender- and disability- responsive			
Learners receive at least one health education messages per day on COVID-19			
Key health information and messages are visibly placed at the main entrance/exit points and strategic locations throughout the school			
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HEALTH MONITORING			
Teachers start all classes by asking if any learners feel sick			
School monitors the temperature of learners, teachers, and other school staff and any visitors upon arrival at			
the designated school entry point using a thermal scanner			
Parents and guardians are informed that they should alert the school and health care authorities if someone in their home has been diagnosed with COVID-19			
Teachers monitor and track daily class attendance			
Schools have a consolidated record book for absenteeism			
School have contact information for parents and guardians of learners			
The school has a designated phone available for following up on learners and calling the health helplines			
Teachers/school authorities follow up on absent learners by calling their parents or guardians to determine			
cause of absence and guide parents accordingly			
A system is in place to review attendance data weekly and to notify authorities of significant changes in			
absenteeism			
The school has a buddy-system in all classes where staff and learners check on each other and report to school			
authorities when someone in their group is not well			
Learners identified with fever, cough, or other symptoms consistent with COVID-19 are isolated and health helpline is contacted immediately			

	Compliant	Semi- compliant	Non- compliant
DISEASE MANAGEMENT			
Learners, school staff, parents and guardians are advised and regularly reminded to remain home and not to come to school when they are sick			
The School encourages parents/guardians to take their children to the local health facility when they are sick			
The school has a designated health room (sick bay) or other applicable space to isolate sick learners and school staff away from the others until help is sought from health authorities			
	-		
The school has a plan in place for isolating and managing sick learners and staff that is consistent with disease management guidelines for schools			
Learners, teachers, and other school staff found to be unwell at school are separated from peers and sent to the health room (sick bay) or other applicable space for assessment			
Teachers, learners, and other school staff arriving at school found to have a fever (temperature above 38.0°C) are isolated from peers until help is sought from health authorities			
Teachers, learners, and other school staff who arrive at school with fever, cough or other common symptoms of COVID-19, or develop those symptoms during the school day, are isolated immediately from their peers until help is sought from health authorities			
The school contacts the health helplines immediately when there is a suspected case of COVID-19 at the school and arrangements made for the them to receive appropriate care			