Guidelines for Health & Sanitary Measures in Pre-Primary Schools

June 2020
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Part A.1 Sanitary and Hygienic Conditions

Prior to School Resumption

- Rapid testing for Covid-19 of all teaching and non-teaching staff
- Cleaning of school compound, yard and water tanks.
- Cleaning and disinfection of school buildings, school canteens and classrooms.
- Disinfection of high touch places such as railings, tables, chairs, sports equipment, door and window handles, teaching and learning aids etc. (furniture, whiteboards)
- Ensuring availability of clean water supply and liquid soap in toilets.
- Availability of covered bins for disposal of used tissues.
- Availability of adequate supply of cleaning supplies and equipment.
- Eligible support staff to be provided with appropriate gloves and face masks during cleaning and disinfection activities and they will be encouraged to practice regular hand washing.
- Availability of alcohol based hand sanitizers at strategic points.
- Designation, demarcation and light furnishing of an isolation room for suspected cases and disinfection of same prior and post utilization.
- Establishment of procedures in case of staff/ learners being unwell (Temperature check, Isolation Room and notification of Health authorities and Parents)
During on-going School activities:

Upon School Resumption

- Staggered school arrival and dismissal times.
- Staggered lunch break to avoid crowd gathering.
- Use of face mask/shields for personnel. No wearing of masks for pre-primary pupils
- Daily contactless temperature checks at school entrance for pupils, teaching and non-teaching staffs.
- Hand sanitizing at strategic points.
- Assigned time slots for regular hand washing.

Cleaning and disinfecting classrooms daily

- Regular cleaning and disinfecting of high-touch places (railings, tables, sports equipment, door and window handles, teaching and learning aids etc.)
- Ensuring an adequate air flow and ventilation in classes by opening windows.
- Ensuring daily removal and safe disposal of trash.
- Regular disinfection of classrooms

Toilet cleaning and disinfection

- Reinforcing frequency of toilet cleaning with appropriate cleaning agents.
- Regular refilling of hand wash.

Reinforce hygienic measures

- Heads of schools to ensure adequate procurement of liquid soap and alcohol- based hand rub as well as availability of clean water supply.
- Schools and educators should reinforce regular hand washing practices with safe water and soap.
- Use of tissue rolls for adequate wiping of hands and covered bins for disposal thereof.
Part A Guidelines for Identification and Reporting of Suspected COVID-19 Cases in Schools

There is the need to strengthen the preventive measures against COVID-19 and heighten the vigilance of staff towards pupils’ health, in the context of class resumption.

- Arrangements have been made with the help of the Ministry of Health and Wellness for the rapid testing of all teaching and non-teaching staff of all schools prior to school resumption as per an established schedule to ensure the health protection of all pupils.
- Parents will be informed of the arrangements for class resumption and encouraged to pay attention to their children’s health condition.
- In the event that a child/pupil is experiencing flu like symptoms and/or fever, parents will be requested not to send their wards to school but instead seek medical advice.
- Heads of schools and teachers should pay attention to the mental and physical health conditions of their staff and pupils.
- If any pupil feels unwell, he/she should be isolated in the designated isolation room and Heads of schools should inform parents to take the pupil back home and arrange for the parents to take their ward to seek medical advice.
- In case the pupil has a fever or is seriously ill, but schools cannot contact his/her parents or guardians, the pupil should be sent to the flu clinic of the nearby hospital for medical treatment. The staff who are temporarily taking care of the pupil should wear mask and gloves and put in place all precautionary measures.
When a Suspected Case of COVID-19 is found in Schools

If a pupil of a pre-primary school or staff is suspected to be a case of COVID-19, the Heads of School will follow the guidelines in the flowchart below:

FLOWCHART FOR OPERATING PROCEDURES IN CASE OF A SUSPECTED COVID-19 CASE IN SCHOOLS

- **Pupil at school presenting with symptoms of suspected COVID-19**
  - Fever ≥ 37.5°C with at least one sign of respiratory illness such as cough difficulty breathing

**Immediate actions**
- Isolate child in designated isolation room
- Contact responsible party
- Inform responsible party to come fetch child to seek immediate medical help.

**Administrative actions**
- **Inform by phone**:
  - nearest flu clinic / Regional Public hospital
  - Zone Director/ECCEA Regional Office
- Fill in Format No 1 "Suspected cases for COVID-19" for students/pupils or Format No 2 for staff
- Fax Format No 1 (or 2) to relevant authorities

**Follow up actions**
- Ascertain pupil/student has been taken to seek medical help.
- Ensure that the isolation room and classrooms have been disinfected.
- Report on health status of pupil
• The flowchart above is to be initiated as soon as any pupil (or staff) displays symptoms of a suspected case of novel coronavirus (COVID-19). In such cases, the name of the pupil, of his responsible party, [or staff] home address, home phone and mobile numbers to be sent immediately to the nearest Flu clinic at Regional Health Hospital, to Zone Directorate and ECCEA Regional Office, [Formats No.1 or No.2] as the case may be.

• When a suspected or confirmed case of COVID-19 is found in schools, schools should strengthen the disinfection measures of the school premises, and remind all members of the schools to step up all preventive sanitary and hygienic measures.
Checklist for flowchart on handling a suspected COVID-19 case

<table>
<thead>
<tr>
<th>SN</th>
<th>Immediate actions taken by Heads of schools</th>
<th>Checkbox</th>
<th>Remarks if any</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Check whether symptoms are consistent with case definition in flowchart</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Isolate pupil/student in designated isolation room</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Ensure child/pupil wears face masks and gloves</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Inform Responsible party by phone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Inform relevant authorities by phone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.1</td>
<td>Nearest flu clinic at Regional Public Hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>SSRNH hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Dr A. G. Jeetoo hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Flacq hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>J. Nehru hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Victoria hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.2</td>
<td>Zone directors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Rodrigues Commission for Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Agalega Central Administration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.3</td>
<td>ECCEA Regional Office (for pre primary schools)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>PSEA (for Private Secondary Schools)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Others:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.1</td>
<td>Fill in Format for &quot;Suspected COVID-19 case&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Format No 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Format No 2 for staff</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.2</td>
<td>Fax Format 1 or 2 to relevant authorities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Ascertain pupil/student was taken to seek medical help</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Disinfection of isolation room and classrooms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Report on health status of pupil/student</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Format No 1

Suspected case of Covid19 in a pupil

One copy of this document to be kept in school. One copy to be faxed to nearest Regional Hospital, Zone Directorate, Regional office as the case may be. In case there are two or more pupils, the Head of school will fax a covering letter listing the names of pupils (from youngest to oldest) and their respective class.

1. Name of school………………………………………………… Zone…………………
2. Address of school………………………………………………………………………
3. Phone No (s)…………………… Fax: ……………………………
4. Name of Head of School……………………………………………… Email address
5. Pupil showing the following symptom(s)
   Please tick one or more items as appropriate:
   (a) Fever [   ] (b) Headache [   ] (c) Cough [   ]
   (d) Aching muscles or joints [   ] (e) Breathing difficulties [   ] (f) Other -
   If other, please specify which other symptoms…………………………………………………
6. Date and time of occurrence of symptoms…………………………………………
7. If attended any health facility? Yes [ ] No [ ]
   if yes, Name of facility……………………………………
8. Name of pupil in block letters…………………………………………………
   a. Other names of pupil …………………………………………………
   b. Did she/he travel recently? Yes [ ] No [ ]
   c. Gender: Male [   ] Female [   ]
   d. Did she/he come in contact with a confirmed case? Yes [ ] No [ ] Unknown [ ]
9. Full name of Responsible Party………………………………………………
10. Home address………………………………………………………………………
12. Action taken at school [ please fill in the blanks and/or tick as appropriate]:

<table>
<thead>
<tr>
<th>SN</th>
<th>ACTION</th>
<th>CHECKBOX</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>Responsible party informed at ………… hours</td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td>Isolation of pupil to a separate room at …… hours</td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td>Taken at home by Resp party at …………</td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td>Nearest flu clinic at Regional Hospital (Name of Hospital): ………… informed</td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td>Zone Directorate/ECCEA Regional Office informed</td>
<td></td>
</tr>
</tbody>
</table>

13. Date………………………… Signature of Head of school …………………
Format No 2

Suspected case of Covid19 in staff

One copy of this document to be kept in school. One copy to be faxed to nearest Regional Hospital, Zone Directorate, ECCEA Regional Office as the case may be.

1. Name of school………………………………………………. Zone……………………
2. Address of school……………………………………………………………………
3. Phone No (s)………………………….. Fax: ………………………
4. Name of Head of School……………………………………………Email Address……………………………………
5. Staff showing the following symptom(s) Please tick one or more items as appropriate:
   a. Fever [   ] (b) Headache [   ] (c) Cough [   ] (d) Aching muscles or joints [   ] (e) Breathing difficulties [   ] (f) Other -
      If other, please specify which other symptoms…………………………………………………………
6. Date and time of occurrence of symptoms ………………………………………………….
7. If attended any health facility?  Yes [   ] No [   ]
8. Name of staff in block letters………………………………………………….
    a. Other names of staff …………………………………………………
    b. Did she/he travel recently?  Yes [   ] No [   ]
    c. Gender:  Male [   ] Female
    d. Did she/he come in contact with a confirmed case?  Yes [   ] No [   ]
    e. Age group: 21-30 [   ] 31-40 [   ] 41-50 [   ] 51+ [   ]
9. Name of emergency contact…………………………………………………….
10. Home address…………………………………………………………………………
11. Contact No. of emergency contact: Home …………………. Mobile…………………
    Office…………………………
12. Action taken at school [ please fill in the blanks and/or tick as appropriate]:

<table>
<thead>
<tr>
<th>SN</th>
<th>ACTION</th>
<th>CHECK IN</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>Isolation of staff in a separate room at ........ hours</td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td>Left school at ...............</td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td>Nearest flu clinic at Regional Hospital (Name of Hospital):....................... informed</td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td>Zone Directorate and ECCEA Regional Office</td>
<td></td>
</tr>
</tbody>
</table>

Date:…………………………….  Signature of Head of school
…………………………
Case definitions of a suspected case of COVID-19 as per WHO

Case definition of a suspected case of novel coronavirus2019 as per who

Suspect case

A. A patient with acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath), AND/OR a history of travel to or residence in a location reporting community transmission of COVID-19 disease during the 14 days prior to symptom onset;

OR

B. A patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID-19 case (see definition of contact) in the last 14 days prior to symptom onset;

OR

C. A patient with severe acute respiratory illness (fever and at least one sign/symptom of respiratory disease, e.g., cough, shortness of breath; AND requiring hospitalization) AND in the absence of an alternative diagnosis that fully explains the clinical presentation.

Confirmed case

A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

Contact

A contact is a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case:

1. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes;

2. Direct physical contact with a probable or confirmed case;

3. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment(PPE);

OR

4. Other situations as indicated by local risk assessments.

Note: Contact may also take place with persons with are asymptomatic but later turn out to be confirmed cases. The period of contact with such a person is measured as the 2 days before, as well as the 14 continuous days after, the date on which the sample which led to confirmation was taken.
Part B Basic Sanitary Measures

How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

Duration of the entire procedure: 40-60 seconds

0. Wet hands with water;
1. Apply enough soap to cover all hand surfaces;
2. Rub hands palm to palm;
3. Right palm over left dorsum with interlaced fingers and vice versa;
4. Palm to palm with fingers interlaced;
5. Backs of fingers to opposing palms with fingers interlocked;
6. Rotational rubbing of left thumb clasped in right palm and vice versa;
7. Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;
8. Rinse hands with water;
9. Dry hands thoroughly with a single use towel;
10. Use towel to turn off faucet;
11. Your hands are now safe.

World Health Organization | Patient Safety | SAVE LIVES
A World Alliance for Safer Health Care | Clean Your Hands

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WHO acknowledges the World Health Conferences de Genève (WCH), in particular the members of the Infection Control Programme, for their active participation in developing this material.
How to Handrub?
RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

Duration of the entire procedure: 20-30 seconds

1a Apply a palmful of the product in a cupped hand, covering all surfaces;
1b Rub hands palm to palm;
2
3 Right palm over left dorsum with interlaced fingers and vice versa;
4 Palm to palm with fingers interlaced;
5 Backs of fingers to opposing palms with fingers interlocked;
6 Rotational rubbing of left thumb clapped in right palm and vice versa;
7 Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;
8 Once dry, your hands are safe.

World Health Organization

Patient Safety
A World Alliance for Safer Health Care

SAVE LIVES
Clean Your Hands

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How to **put on, use, take off and dispose of a mask**

1. Before putting on a mask, wash hands with alcohol-based hand rub or soap and water.

2. Cover mouth and nose with mask and make sure there are no gaps between your face and the mask. Avoid touching the mask while using it; if you do, clean your hands with alcohol-based hand rub or soap and water.

3. Replace the mask with a new one as soon as it is damp and do not re-use single-use masks.

4. To remove the mask: remove it from behind (do not touch the front of mask); discard immediately in a closed bin; wash hands with alcohol-based hand rub or soap and water.
**Part C Use of Bleach**

**The Use of Bleach**

Bleach is a strong and effective disinfectant. Its active ingredient, sodium hypochlorite, denatures protein in micro-organisms and is therefore effective in killing bacteria, fungi and viruses. Household bleach works quickly and is widely available at a low cost. Diluted household bleach is thus recommended for the disinfection of environment.

As bleach irritates mucous membranes, the skin and the airway, decomposes under heat and light and reacts readily with other chemicals, bleach should be used with caution. Improper use of bleach may reduce its effectiveness in disinfection and can injure users. Overuse of bleach will pollute the environment and disturb ecological balance.

**Tools and Equipment**

Get all necessary tools and equipment ready, such as household bleach, measuring tools, containers and Personal Protective Equipment.

**Preparing/ Using Diluted Bleach**

(a) Dilute and use bleach in a well-ventilated area. Put on appropriate Personal Protective Equipment (e.g. mask, gloves, safety goggles and plastic apron) when diluting or using bleach as it irritates mucous membranes, the skin and the airway.

(b) Mix bleach with cold water as hot water decomposes the active ingredient of bleach and renders it ineffective.

(c) Bleach containing 5.25% sodium hypochlorite. Properly dilute the bleach to achieve appropriate concentration as follows:

   (i) 1:99 diluted household bleach (mixing 1 part of 5.25% bleach with 99 parts of water) is used for general household cleaning and disinfection.

   (ii) 1:49 diluted household bleach (mixing 1 part of 5.25% bleach with 49 parts of water) is used for surfaces or articles contaminated with vomitus, excreta and secretions.

   (iii) 1:4 diluted household bleach (mixing 1 part of 5.25% bleach with 4 parts of water) is used for surfaces or articles contaminated with blood spillage.

(d) Make adjustments to the amount of bleach added if its concentration of sodium hypochlorite is above or below 5.25%.
(i) Calculation: Multiplier of the amount of bleach added = 5.25 concentration of sodium hypochlorite in bleach

(ii) For example, when diluting a bleach containing only 5% sodium hypochlorite, the multiplier is $5.25/5 = 1.05$. That means $10\text{ml} \times 1.05$

(iii) = 10.5ml of bleach should be used when preparing a bleach solution.

(iv) Use a tablespoon or measuring cup for accurate measurement of the amount of bleach added.

(v) Wash hands thoroughly after the procedure.
Precautions for the use of bleach

(i) Avoid using bleach on metals, wool, nylon, silk, dyed fabric and painted surfaces.

(ii) Avoid touching the eyes. If bleach gets into the eyes, immediately rinse with water for at least 15 minutes and consult a doctor.

(iii) Do not use bleach together with other household detergents as this reduces its effectiveness in disinfection and causes dangerous chemical reactions. For example, a toxic gas is produced when bleach is mixed with acidic detergents such as those used for toilet cleaning. This can result in accidents and injuries. If necessary, use detergents first and rinse thoroughly with water before using bleach for disinfection.

(iv) Undiluted bleach liberates a toxic gas when exposed to sunlight, thus store in a cool, shaded place and out of reach of children.

(v) Sodium hypochlorite decomposes with time. To ensure its effectiveness, purchase recently produced bleach and avoid over-stocking.

(vi) For effective disinfection, use diluted bleach within 24 hours after preparation as decomposition increases with time if left unused.