



Heritage Christian School Board Policy	
Approval Date September 2020	Identification COV-4006
Last Review Date September 2020	Page 1 of 3
Next Review Date 2024/25	Policy Section COVID

## SUPPLY TEACHER POLICY

The health, safety and well-being of students and staff is a top priority as the School plans to reopen for the 2020/21 school year.

The School appreciates and requires your cooperation in reopening. The School is commencing reopening based on the assurance that all persons entering School premises have taken proper precautions to prevent the transmission of COVID-19. Indeed, the successful return to school and remaining open will require diligence by all parents, guardians, staff, and visitors.

The best understanding of the present evidence is that COVID-19 can be transmitted by persons who do not exhibit symptoms. There is no guarantee that COVID-19 will not be contracted by persons entering School premises.

We require that all staff, including supply teachers, engage in a process of self-screening **prior to arrival** at the School each day. In addition to daily active screening, please note that all supply teachers will be monitored at School for possible signs or symptoms of illness. When a supply teacher is exhibiting symptoms, they will be removed from regular duties and will be sent home to monitor symptoms and/or seek medical attention.

Each supply teacher will be required to complete a health check-in as they enter the school. Supply teachers who have not completed the screen will not be allowed to attend school. All supply teachers must sign the Acknowledged Health Risk Consent Form before beginning work at Heritage Christian School. This form is valid through the 2020-2021 school year.

Because Supply teachers may have worked in alternate locations and come from unknown circumstances, they will be required to wear masks while they are working in the Heritage building. As much as possible to ensure, supply teachers will work in minimal school settings.

Although Heritage will have distancing, sanitization, personal protection, and student cohorting measures in place, there is still an acknowledged risk to entering the school building with other children and adults.

As a Supply Teacher, you must prevent the spread of illness by staying home from School if you experience **any** of the following signs or symptoms:

- Fever (temperature of 37.8°C or greater)
- Chills
- New or worsening cough
- Barking cough, making whistle noise when breathing



- Shortness of breath
- Sore throat
- Difficulty swallowing
- Runny nose (not related to seasonal allergies or other known causes or conditions)
- Stuffy or congested nose (not related to seasonal allergies or other known causes or conditions)
- Lost sense of taste or smell
- Pink eye (conjunctivitis)
- Headache that is unusual or long lasting
- Digestive issues, such as nausea/vomiting, diarrhea, stomach pain
- Muscle aches that are unusual or long lasting
- Extreme tiredness that is unusual (fatigue, lack of energy)
- Falling down often

If you experience any of the symptoms while at the School, you will be sent home immediately. If you are required to wait for transport home, you will be separated from all staff and children.

#### **COVID-19 IDENTIFICATION AND RETURN TO SCHOOL**

Supply Staff who become ill will be sent home immediately and directed to seek assessment and testing at a COVID-19 Assessment Centre. If COVID-19 is ruled out by a test or health care provider, the employee may return to school following symptom resolution.

When a supply teacher has suspected COVID-19, the school will contact the HKPR Region Health Department (866) 888-4577 ext. 1508 Health Protection Division at as soon as possible.

If a COVID-19 positive case is identified in a school, a COVID-19 outbreak will be declared by the HKPR Region Health Department. Further direction will be provided by the HKPR Region Health Department on who else in the school may need testing and/or monitoring/isolation at that time.

Supply teachers who are being managed by the HKPR Region Health Department (e.g. confirmed cases of COVID-19, household contacts of cases) must follow instructions from public health to determine when to return to school.

For further questions about COVID-19 in the school staff may contact the HKPR Health Connection Line at (866) 888-4577 ext. 5020 (Monday to Sunday 8am - 6pm).



## ACKNOWLEDGED HEALTH RISK CONSENT FORM

As a Heritage Staff member, I agree to the following:

- I have read and understood the above information.
- I understand the risk of illness associated with placing my child in the School.
- Neither I, nor anyone in my household, nor anyone with whom a member of my household has been in close contact, has tested positive for COVID-19 or had any of the symptoms in the last 14 days. If such symptoms or positive test for COVID-19 occur after submitting this form, I will immediately exclude myself from School.

*Note: close contact includes living with, providing care, or otherwise having close prolonged contact (within 2 meters) with another person.*

- Neither I, nor anyone in my household, nor anyone with whom a member of my household has been in close contact, has traveled to or had a layover in any country outside Canada in the past 14 days. If such return from travel occurs after submitting this form, I will **immediately** exclude myself from School, and will not attend the School until a minimum period of 14 days has passed after the date of return to Canada. I understand that voluntarily travelling outside of Canada during a period interfering with the school schedule will be considered a breach of contract and will enter myself into a 14 day period without pay.
  - Exceptions will be made for those in situations of essential travel, and where regular screening has been undergone.
- I agree to the screening requirements and to accurately carry out the daily screening. Misrepresentation regarding the information provided to the School could result in my exclusion from the School.
- Upon request by the School, I consent to providing copies of my COVID-19 test results to the School.
- This agreement remains in effect for the duration of the 2020/21 school year.

---

Name of Supply Teacher

---

Date

---

Supply Teacher Signature

---

Name of Witness

---

Date

---

Signature Witness