



GUIDANCE NOTE AND PROTOCOLS

SIERRA LEONE OPERATING SAFE AND PROTECTIVE LEARNING ENVIRONMENTS IN EBOLA OUTBREAK CONTEXTS



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Republic of Sierra Leone

Ministry of Education, Science and Technology

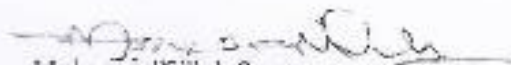
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The document is based on the draft Guidance Note and Protocols for operating safe and protective learning environments in Ebola outbreak contexts developed by UNICEF West and Central Africa Regional Office, and adapted to the context of Sierra Leone.

Collaboration and commitment of all stakeholders in the education sector and the whole school community is fundamental to support the Government of Sierra Leone in their efforts to get children back in the classroom and learning.



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Abbreviations

ABC	Avoid Body Contact
CDC	Centers for Disease Control and Prevention
CTA	Community Teacher Association
DHMT	District Health Management Team
EBOLA	Ebola Virus Disease
GoSL	Government of Sierra Leone
IPC	Infection Prevention and Control
MC	Mother's Club
MEST	Ministry of Education, Science and Technology
MoHS	Ministry of Health and Sanitation
NERC	National Emergency Ebola Response Center
NGO	Non-Governmental Organization
PHU	Public Health Unit
SMC	School Management Committee
SMS	Short Message Service
WHO	World Health Organization

Introduction

The current Ebola outbreak, which spread to Sierra Leone in May 2014, is preventing children of all ages from realizing their right to education. Education is integral to a child's healthy growth and development. It brings children a sense of normalcy, hope and stability. In times of crisis, children are particularly vulnerable, and women and children are disproportionately affected. Education can help mitigate the psychosocial impact on children by reducing fear and addressing issues of stigma. Access to education helps to build children's resilience, rendering them less vulnerable to the various protection risks common during emergencies, including physical, sexual and emotional abuse, violence, neglect, exploitation, and early marriage.

At the moment, preschools, as well as primary, secondary, technical schools and universities are closed across all fourteen districts in Sierra Leone. The decision to reopen schools is at the discretion of the government, and in particular the National Emergency Ebola Response Center (NERC), the Ministry of Education, Science and Technology (MEST) and the Ministry of Health and Sanitation (MoHS) and should be based on reliable epidemiological information about the level of containment of the virus, the safety of large group gatherings, the capacity of the health system and the level of preparedness of the schools themselves to support the health and safety of children.

As Government of Sierra Leone (GoSL) and partners, we need to ensure that all the necessary measures are in place by the time schools reopen to ensure that children are not at risk of contracting or spreading Ebola by attending school. As this is not an education-only matter, close inter-sectorial collaboration at country level is required with:

- Ministry of Health and Sanitation
- Ministry of Social Welfare, Gender and Children's Affairs
- Ministry of Water Resources
- Ministry of Local Government and Rural Development
- Ministry of Finance and Economic Development.
- Donor agencies
- UN agencies
- International and national NGOs and Civil Society

Education coordination mechanisms should be set-up at national, decentralized, and school levels and include school health and medical authorities.

Once schools reopen, the MEST, in partnership with the MoHS and others, should implement the following protocols for the duration of the Ebola epidemic and beyond. Collaboration and commitment of the whole school community is fundamental to the successful management of our schools. Education partners are ready to support the government in their efforts to get children back in the classroom and learning.

What does the guidance note and protocols cover?

- ✓ Measures to be put in place before school re-opening
- ✓ Measures to be put in place when schools are open (including safe health and hygiene practices and psychosocial support and reducing stigma)
- ✓ Ebola suspected case referral and handling in schools
- ✓ Communicating with families
- ✓ Training teachers and education personnel

How to use this guidance note and protocols?

The **guidance note** shall:

- Provide a technical resource on the measures that need to be in place for schools to serve as safe and protective environments for children. It is not a decision-making tool on whether schools should reopen.
- Inform official communication by the MEST to schools about measures to be taken for the reopening and functioning of schools as safe and protective environments.
- Feed into teacher training modules on Ebola prevention, operating safe and protective learning environments, and providing psychosocial support.
- Provide content for the production of teacher training materials and guidance to be shared with school administrators and teachers to equip them to contribute to operating safe and protective learning environments.
- Guide the production of communication tools and materials for schools with some of the key messages.

The **protocols** (highlighted in boxes) suggests a set of concrete procedures and mechanisms that need to be put in place and practiced at school during the Ebola outbreak and beyond in order to ensure that school is a safe learning environment for children.

1 Prior to the School Re-opening

1.1 Cleaning and decontamination of schools before re-opening

All schools need to be cleaned prior to re-opening. Any school that was used as an Ebola care facility need to be cleaned and decontaminated in order to ensure they are safe for children to return. Cleaning and decontamination is part of a broader approach to preventing infectious diseases like the Ebola in schools by killing germs on surfaces or objects.

What to do with regards to the cleaning and decontamination of schools:

All schools need to be cleaned prior to re-opening.

If the school was used as an Ebola care facility, the school head must inform immediately the District Education Office and District Health Management Team (DHMT), who will organize the decontamination with the Infection Prevention and Control (IPC) focal person in the district.

Any school that was used as an Ebola care facility must be inspected by an IPC focal person/DHMT prior to re-opening to ensure the decontamination process has been completed according to the standards/guidelines established in the “Decontaminating the Ebola Facilities in Sierra Leone” document.

As part of the Back-to-School campaign, communities need to be informed about the cleaning and decontamination of schools before they reopen. Possible concerns by communities with regards to the cleaning and decontamination of schools need to be addressed in an adequate manner.

1.2 Identifying possible Ebola exposure during school closure

Before school reopens, any possible exposure to Ebola by pupils, teachers, and other school personnel during the last 21 days should be identified. Knowledge of recent contact will reduce the possibility for anyone to demonstrate possible Ebola symptoms while at school, thus exposing others to the Ebola.

How to identify possible Ebola exposure by pupils, teachers, and other school personnel:

An information form of an individual record will be distributed to and completed by parents, students, teachers, and other school personnel during the Back-to-School campaign. The information form needs to be submitted to the school head (principal/head teacher) prior to the first day of school. This form provides information to identify any possible cases of exposure to Ebola in the last 21 days.

School head should communicate with the DHMT to identify students and education personnel, who were exposed to Ebola or are currently being monitored post- Ebola exposure.

Children or education personnel identified as Ebola contacts will be asked to stay home from school for the duration of the monitoring period of 21 days from the day of last contact. The procedures for the monitoring of Ebola contacts are described under Section 3.2. School heads will communicate with DHMT to determine when students and education personnel identified as Ebola contacts are eligible to return to school.

It is important that contacts are treated in a dignified way with care and affection, and not as a danger.

School heads can call a meeting of Community Teacher Association (CTA) to share this information with the community well before the reopening of schools.

1.3 Providing necessary mechanisms and physical conditions for Ebola prevention at schools

The provision of necessary mechanisms and physical conditions for Ebola prevention at school prior to the re-opening of schools must be ensured.

Mechanisms:

- Entry to school must be controlled by measuring temperatures of students, teachers, visitors (e.g., parents, vendors), and education personnel each day so that no one with a fever enters the school premises. A small committee can be formed among teachers and/or parents.
- Anyone who shows Ebola symptoms should not be allowed to enter the school premises.
- One of the most important mechanisms that must be put in place before the schools open is the referral system with the nearby health centres and DHMT. Therefore, schools must ensure they have the contact details of the parents/guardians of all their students as well as the contact details of the nearest health centre or DHMT.

Physical conditions:

- Within school premises, hand hygiene and sanitation facilities must be in place as hand washing is one of the most effective measures to prevent Ebola. There should be **hand washing stations with water and soap** in each school.
- A small physical space where ill students, education personnel and visitors can be temporarily isolated while waiting for help from the appropriate authorities.

1.4 Providing adequate equipment to schools

The risk of EBOLA calls for equipping schools with specific supplies that can contribute to the prevention of Ebola in school settings. The following list of supplies should be provided for schools:

- **Minimum 2 Infrared thermometers**, replacement batteries and instructions on how to properly calibrate thermometer
- **First Aid Kit**

- **School Hygiene Kit**
 - Hand washing stations
 - Soap
 - Items for cleaning including chlorine

2 When Schools are Open

The school head has the overall responsibility for ensuring Safe School Environment protocols are in place and followed. Measures to ensure a safe school environment begin when teachers and children arrive at school each day.

2.1 Establishing and enforcing clear admission rules

2.1.1 Rules about student admission to schools

New admission rules will be established and enforced for school reopening. Communication to school administrators, teachers and parents about new admission rules need to be disseminated through a variety of channels and at different levels. At the national level, a formal statement by the Minister of Education on TV and the radio – relayed by community radios as well as at the local level, through information-sharing by education partners, school administrators and community communication networks (traditional leaders, religious leaders, etc.) as well as CTAs, School Management Committees (SMCs), Mother’s Clubs (MCs), etc. The use of SMS could also be helpful. The admission rules should also be disseminated through the existing social mobilization structures, back-to-school campaign and information leaflets/admission prospectus distributed to the parents with relevant information.



Schools must inform parents/communities:

- If a child shows any signs of sickness, parents/care takers should not send the child to school and contact the nearest health facility.
- If a child has been in contact with an Ebola patient, parents/caretakers should not send the child to school and should contact the Ebola Hotline 117.
- A child who has been in contact with an Ebola patient must stay away from school for 21 days from the day of last contact. The child may return to school sooner if the suspected Ebola patient they came in contact with is tested and shows not to have Ebola. The DHMT will inform school head when a student is eligible to return to school.
- A child who shows any symptoms of Ebola, which include fever, headache, joint and muscle aches, weakness, diarrhea, vomiting, abnormal bleeding, etc. must be referred immediately by calling the Ebola Hotline 117.
- At the beginning of the school year, a health assessment form must be completed.

- The school is keen to include all children who are currently not sick to participate in the school's activities.

Parents/communities must call Ebola Hotline 117 and inform the school heads if:

- The child or someone in the family has been in contact with an Ebola patient or someone they think has died of Ebola.
- Any of their children at home are sick, including with non-Ebola symptoms.

2.1.2 Rules about teacher admission, education personnel and visitors to school

It is important for teachers, education personnel and visitors to remember that they can be a source of infection to children and other teachers. MEST should formally communicate with teachers and education personnel. These messages should be included in teacher orientations before they are deployed to schools as well as through other channels (e.g. posters, public service announcements, SMS). The public should be sensitized and made aware about the responsibilities of the teachers through jingles and discussion programmes on radio/TV.

MEST should communicate to teachers and education personnel the following key messages:

- Be vigilant about your health and the health of your co-workers. Do not go to work if you are sick.
- Check your temperature if you feel ill. If you have a temperature above 38°C, do not go to work and do not interact with students. Immediately isolate yourself and call the nearest health facility for assistance or 117.
- If you are sick, inform your head of school immediately.

2.2 Screening before entering schools

A high temperature or fever (over 38°C) is one of the first symptoms of Ebola. Therefore, measuring temperatures is critical to identifying potential Ebola cases as early as possible. All schools should have at least two working and properly calibrated infrared thermometers.

Infrared thermometers allow people to measure the temperature without having any physical contact or contact with body fluids.

Normal thermometers that measure temperatures through the mouth or under the arm should not be used, since saliva and sweat are potential vectors for infection of Ebola.

The temperature should be taken on a daily basis before everyone enters school premises. Teachers, education personnel, and visitors should also be checked for a high temperature before entering school premises on a daily basis.



The school head can ask children and teachers to come to school earlier in order not to delay the start of classes. Spatial organization of this exercise also needs to be taken into consideration as well as perimeter fencing of school premises in order to ensure that children are within their confines and entrance to school premises can be restricted and regulated.

This responsibility should be given to one or more designated personnel of the school, after having received an orientation by the Ministry of Health and Sanitation. The school head should consider forming a “Fever Monitoring Committee” of volunteers to assist. In case of limited personnel of the school, the SMC, CTA or MC can be coopted.

Screening before entering school premises:

Every school day, a small team of people (“fever monitoring team”) must measure temperatures of all incoming individuals. If the individual does not show any signs of fever, he/she is allowed to enter the school premises. In case fever is detected at the school entrance, please refer to Section 3.1.

School heads may ask the children and teachers to come to school earlier to avoid delaying the start of classes.

During the Ebola epidemic, access to school is prohibited to a student, teacher, or any other person who:

- Has a fever over 38°C;
- Appears unwell with symptoms such as;
 - headache
 - joint and muscle pain
 - diarrhoea
 - vomiting
 - abnormal bleeding
 - weakness; or
- Does not agree to respect the preventive measures put in place in schools; and
- Anyone not authorized by the school head to be on the school premises.

How to use the infrared thermometer:

When measuring temperatures using the infrared thermometer, it is important to avoid physical contact with the person. Fever monitors should follow the instructions of the provided thermometer to calibrate and use it correctly. Change batteries regularly.

2.3 Safe health and hygiene practices

2.3.1 WASH facilities and hand washing

Hand washing with soap is one of the most effective ways to prevent the Ebola transmission. The recommended method is the use of water and soap.

Hand washing

It is the school head's responsibility to ensure that water and soap are available at school for hand washing and for cleaning the school environment. Clean drinking water must also be available for children in all schools. The minimum amount of water in schools should be 2 to 3 litres of water per student per day for drinking and hand washing. The school head may request support from CTA.

How to wash hands:

- Wash hands under running water
- Rub hands with soap
- Rub hands together for about 40-60 seconds
- Rinse hands with water
- Air dry hands

When to wash hands:

Children should always wash their hands(4Plus of Hand Washing):

- Upon arrival at school, before entering the classroom
- After using the toilet
- Before and after eating
- After play breaks
- After handling body secretions or blowing their nose (tears, nose secretions, saliva, etc.)

Teachers and education personnel should always wash their hands:

- Upon arrival at school, before beginning to work
- Before preparing food, eating, or helping children eat
- After using the toilet and helping a child to use the toilet
- After blowing his/her nose or helping a child blow his/her nose
- After contact with any body secretions (tears, nose secretions, saliva, blood)

The hand washing stations should be placed at the school entrance and latrines. Where available, additional hand washing stations should be placed in front of the sick bay, class rooms, dining area and play ground.

Students, families and communities have an important role to play to enforce the hygiene rules and practices at schools.

It is a requirement for schools to have child-friendly and gender segregated WASH facilities. The MEST has the responsibility to ensure WASH facilities in schools are in place.

What to do if...

- a school does not currently have **hand washing facilities**:
 - ✓ Set-up hand washing stations with buckets with taps (veronica's bucket) or water tanks with taps. Soap should be easily accessible at all hand washing stations.
- there is no **water supply** in the school:
 - ✓ The school head may request support from CTA to provide a minimum of water supply per child in school.
- there are no **toilet facilities** in the school:
 - ✓ The school head may request support from CTA to provide toilet facilities in schools.

2.3.2 Cleaning schools

The school environment, including school furniture, equipment, and toys, should be frequently and thoroughly cleaned to avoid the transmission of Ebola. Establish regular cleaning schedules and monitor them. Teachers, students, and CTAs can help the school head to monitor the activity.

Cleaning schedules should include the following instructions:

- Clean school environment, including school furniture, equipment, and toys frequently and thoroughly.
- Clean floors and surfaces using a damp cloth at least once a day with water and detergent.
- Wash and disinfect toilets and hand-washing stations at least once a day. Disinfect surfaces with a 0.5% chlorine solution or a solution containing 5,000 ppm (parts per million).
- Immediately clean up all spillages of blood, faeces, saliva, vomit, nasal and eye discharges. Be extra careful not to touch them.
- If cleaning blood stains, vomit, stool, or urine, follow the following steps;
 - a. Ensure children are not in the room
 - b. Wear heavy duty gloves to protect hands;
 - c. Use a towel/cloth to contain and wipe up the spill;
 - d. Dispose towel/cloth in waste container, or place in a container for washing;
 - e. Use a clean cloth/mop to clean the area with water and detergent;
 - f. Wipe the surface again to decontaminate using 0.5% chlorine solution;
 - g. Remove gloves, clean hands with water and soap;

The school head needs to ensure that cleaning schedules are monitored regularly.

2.3.3 Additional safety precautions at school

All schools need to be equipped with first aid kits.

In the event of cuts and scrapes:

- Do not touch any body fluids
- Rinse with soap and water
- Cover all cuts and abrasions with dressings if available
- Gloves should be worn whenever contact with blood is anticipated, e.g. dressing a cut, helping a child with a nosebleed.
- If contact with body fluids occurs, do not panic but wash with soap and water.

2.3.4 Limiting physical contact between children

One of the biggest challenges for the schools in the Ebola outbreak is to minimize the physical contact to mitigate the risks of contracting the Ebola virus. While children need to express and be expressed affections by others, teachers should remind and inform children of hygiene and safety precautions.

Schools should ensure that there is enough sitting arrangement for their students. School administrators and teachers should also be encouraged to find creative solutions to avoid overcrowding in classrooms. Sitting arrangement should be to a maximum of 3 students per table. Children need to be provided with guidance on the things they can do.

The followings are suggested:

- Provide additional sitting arrangements for children.
- Remind and inform children of hygiene and safety precautions.
- Children should be discouraged from putting pencils or pens in their mouths.
- “Avoid Body Contact” (ABC) should be maintained.
- Sports and plays that include physical contact should be avoided where possible, and should be substituted by other activities that do not involve physical contact.

2.3.5 Eating practices and food in school

Extra precautions should be taken with regard to the food that is being provided in schools. The school head, with help of CTAs and the community members, should ensure to mitigate the risk for children to be infected by Ebola when children seek for food near the school premises during school hours.

The followings are suggested:

- Children should not leave the schoolyard until the end of the school day.
- Food must only be sold inside the school compound by authorised vendors. Food vendors must

follow the same procedures for the school entry and hand-washing with soap before entering school premises.

- The sale of unsafe food and bush meat should be prohibited on school premises.
- Remind children not to:
 - Eat food that has touched the ground.
 - Share the same cup or utensils for eating.
 - If the school provides utensils and supports communal eating, consider purchasing additional bowls and utensils to prevent sharing or asking the children to bring their own from home.

2.4 Providing psychosocial support and reducing stigma

The Ebola outbreak has taken away simple joys of life from everyone. This has been a scary experience. Psychosocial support can help children to cope better and reduce stigma.

The Ebola outbreak has forced Sierra Leonean society to change behaviour. Communities are under enormous pressure and are experiencing fear and panic. Children are missing affection from their parents and care-givers. Experiences that can be traumatic to everyone include being pointed at by an infrared thermometer that looks like a gun, or being placed in isolation.

Providing psychosocial support to children:

The school head and trained teachers are responsible for ensuring that children receive the psychosocial support they need and reducing stigma in the school setting. It is especially important for children who lost a parent/care giver to Ebola or are an Ebola survivor themselves.

3 simple psychosocial support messages:

- **Listen:** Take time for deep listening: nod and agree without judgment or advice.
- **Play:** Give children opportunities for recreation each day.
- **Repeat:** Create routines (including listening and play) so children can feel control each day.

School administrators and teachers can also refer these children to child protection services if considered necessary.

3 Ebola Suspected Case Referral and Handling in Schools

When anyone is identified with high fever or any other symptoms of Ebola at school, specific steps must be followed carefully. It is necessary to contact his/her family. While touching the person with Ebola symptoms must be avoided to mitigate the risk of being infected (strictly follow the specific steps), it is important to remember to treat the child/person with care and affection, as you would normally do with a sick child/person.

3.1 Fever or Ebola symptoms detected at the school entrance or during school hours

Children/persons may develop a high fever or other Ebola symptoms during school hours. Therefore, it is important to continuously observe whether if anyone appears unwell.

When a child/person is detected with fever or is unwell at the school entrance or during school hours:

- When a child/person is detected with high fever (over 38°C) or reports/appears to be unwell, the fever monitoring team or teachers alert other members of the team.
- The child/person must be taken to the pre-identified Safe Bay for temporary isolation, and one member of the fever monitoring team must stay with the child/person.
- Do interview/information form with person/child.
- Inform the child/person's family.
- Call Ebola Hotline 177/DHMT/Public Health Unit (PHU), and tell them that you have a child/person with fever higher than 38°C.
- Do not touch the child/person, and avoid contact with any body fluids (tears, nose secretions, saliva, blood, sweat, urine, blood, vomit, sweat).
- During this time, attend the person with care and affection but maintain a distance of at least 1 meter (3 feet).
- Stay with the child/person until Surveillance Team/PHU arrives to review the case.
- Remember that it is important that those who are unwell are treated in a dignified way with care and affection, and not as a danger.

Suspected/confirmed case:

- If it is a suspected Ebola case the child/person will be taken to the holding centre; the school administration/teachers should support the DHMT/Surveillance team with contact tracing.
- If the Ebola case is confirmed, the child/person will be referred to a hospital for treatment; the DHMT/Surveillance Team will advise schools about necessary decontamination and if school closure is necessary.

3.2 Monitoring period of 21 days

The monitoring period for a contact of a person with Ebola is 21 days, during which the contact should stay home and be monitored by DHMT/Surveillance Team. If symptoms of Ebola appear they should immediately call the Ebola Hotline 117.

If a child/person needs to be monitored:

- A child/person who has been in contact with an Ebola patient must stay away from school for the monitoring period of 21 days from the day of last contact.
- A child/person who had been taken to a holding centre must stay at home for 21 days of monitoring period, even if the Ebola case was NOT confirmed.

They will be monitored during this period by the DHMT/Surveillance Team.

If the child/person does not show any Ebola symptoms for 21 days, the child/person is allowed back to school on day 22 with a 'Clearance Form'.

The family members of the person with a suspected case of Ebola will not be allowed to enter the school premises during the monitoring period to avoid the possible Ebola transmission in schools.

During the monitoring period, the school should provide ongoing support. For students, self-directed learning materials and activities can be provided. For teachers and other school personnel, their salary should not be reduced for being absent from school.

3.3 Tracing possible contacts of Ebola cases

When a case of Ebola is suspected, it is critical to find out where, when, from whom, and how the child/person may have contracted the Ebola virus. This information ensures that everyone who may have been exposed to the Ebola virus, but may not be aware of it, can be informed and monitored properly to prevent the further transmission of Ebola. It is called 'contact tracing' and will be done by DHMT/Surveillance Team.

How to support contract tracing of DHMT/Surveillance team:

In case of a suspected Ebola case in school, school administrators/teachers should assist the DHMT/surveillance team during investigation and contact tracing activities:

It is critical to find out **where, when, from whom, and how** the child/person may have contracted the Ebola virus.

3.4 Returning to school

When 21 days of the monitoring period pass, and the child/person has not developed Ebola symptoms, s/he can return to school on day 22. The DHMT must issue a 'Clearance Form', which needs to be presented to the school head. If an Ebola case is confirmed and the person with Ebola is treated and discharged from the hospital, s/he can return to school with the 'Certificate of Discharge'. A person cured of Ebola can no longer transmit Ebola. It is important the school head and school committees raise awareness in the communities that these individuals are cured of Ebola and pose no risk to the others.

When can a child/person return to school:

Child/person has no Ebola symptoms during 21 days of monitoring:

- Return to school on day 22 with 'Clearance Form'

If an Ebola case is confirmed and the child/person with Ebola is treated and discharged from the hospital:

- Return to school immediately with 'Certificate of Discharge'

The form/certificate must be presented to the school head immediately upon return.

3.5 Death in the school environment

In the event that a person dies in the school environment, keep all people away from the dead body. The dead body may contain active Ebola virus and is highly infectious. Call the Ebola hotline 117, and inform the family and local authorities. While you wait for the DHMT to arrive, all the children/persons should be kept safe. Don't touch the dead body. Please remember to provide psychosocial support to the children and assist DHMT with the investigation and contact tracing activities.

What to do if a child/person dies in the school environment:

- Keep all children/persons safe and away from the dead body.
- Don't touch the dead body!
- Call immediately the Ebola Hotline 117 and wait until DHMT arrives.
- Provide psychosocial support to the children and assist the DHMT with the investigation and contact tracing activities.
- The DHMT/Surveillance Team will advise schools about necessary decontamination and if school closure is necessary.

4 Involvement of Communities

Everyone in the school community has a role to play in ensuring a safe school environment during the Ebola outbreak. Communicating with families and communities and involving them in the effort to prevent Ebola is critical.

Communities need to be sensitised on the Guidance Note & Protocols for operating safe and protective learning environments in Ebola outbreak contexts, new admission rules, referral system and their roles and responsibilities.

Key messages on behaviour changes and new rules should be clearly communicated with families and communities, so that they become the strongest advocates and allies in implementing the *Protocol for Safe School Environment*.

At home, families and communities should exercise good hygiene rules, such as:

- Children should wash their hands with water and soap before eating, after using the toilet, attending to a younger sibling's/other person's toilet, after blowing their nose, and when they are visibly dirty;
- Children should be clean and wear unsoiled clothes to go to school. Keep children's clothes away from urine, vomit and blood;
- Every day before leaving for school, children should be reminded that they should not share food, drinking cups and bottles with their classmates;
- Children must tell teachers without delay when they feel sick (headache, nausea, diarrhoea, vomiting, etc.);
- Children must tell teachers without delay if any household member is sick or has Ebola.

Ministry officials can use different channels: radios (national, rural and community education); community leaders (door to door, chat etc.); traditional and religious leaders; opinion leaders; posters; images; among others. Before and during the school year, the messages can be aired by radio several times a day; during prayers (mosques and churches); and during community based mobilization events as needed.

5 Training of Teachers

In the context of Ebola, teachers need to be trained on the following topics before school reopening: 1) Ebola prevention and social mobilization; and 2) psychosocial support and life skills.

5.1 Training teachers on Ebola prevention

The **teacher training modules on Ebola prevention** can contain the following topics:

- What is Ebola? What are the means of transmission?
- How to prevent Ebola in schools
- How to screen and manage suspected Ebola cases at school
- Hand-washing and hygiene practices
- How to mix chlorine for hand washing and cleaning of surfaces or spills
- Referral mechanisms to health and child protection services
- The role of teachers and education personnel in the Ebola response

Teacher training materials and guidance notes have been developed. In addition to the training, reference materials will be provided to schools. This can include posters or leaflets, recapping the content of the training. DHMT/IPC focal points will be available to provide additional information.

5.2 Training teachers on the provision of psychosocial support

The MEST has developed a teacher training manual for psychosocial support and life skills to help children and people in difficult situations manage their own stress, to help them to be resilient, and to create a supportive learning environment for children. Additionally, a number of practical resources are available for teachers.

Teachers will learn about the stigma and discrimination related to Ebola and the practical measures to make schools stigma-free. The majority of children respond to routine, friendly communication, regular classroom activities, and activities with elements of psychosocial support. The Ebola outbreak created different groups at risk for stigmas: child survivors of Ebola, orphans, and children who lost family members or siblings.

Some children may need professional help beyond what the school can provide. Through the teacher training, teachers will learn how to identify the cases that require referral to the professional help.

The **teacher training modules for psychosocial support** can contain the following topics:

- Psychosocial support: What is the role of family, community, teachers, and schools?
 - Stress
 - Teenage pregnancy
- Available tools. How do we identify a child that is not doing well? How can we support the child?
 - Life skills (decision making, assertiveness, empathy, communication, inter-personal relationship)
- Support for teachers. What do teachers need to be able to effectively support children?
- Contacts for referrals with regards to psychosocial support and child protection.

6 Duration of the Measures

An Ebola affected country can be declared “Ebola-free” after passing two consecutive quarantine periods of 21 days without having any Ebola cases in the country. That is to pass 42 consecutive days after the last Ebola patient in the country is cured. When this occurs, the government, in coordination with World Health Organisation (WHO) and Centers for Disease Control and Prevention (CDC), declares “Ebola-free” to announce that the country has defeated the Ebola.

Even beyond the declaration of Sierra Leone being “Ebola-free”, everyone in the school community should continue to be vigilant and work together to implement *the Protocol for Safe School Environment* to stop the transmission of the Ebola as an immediate priority and to ensure that schools are a safe and protective environment for children during the Ebola outbreak.

Annex A: Roles and Responsibilities

Who	Roles and Responsibilities
Ministry of Education, Science and Technology (national and subnational levels)	<ul style="list-style-type: none"> • Work with all relevant government ministries and education partners to adapt Safe School Environment during the Ebola outbreak for national context. • Work with relevant government ministries and establish a joint work plan to take the plans forward. • Establish a plan for monitoring and reporting of the implementation of the protocols in collaboration with sub-national level government counterparts. • Build the capacities of teachers to render appropriate services.
DHMT/Surveillance Team/PHU	<ul style="list-style-type: none"> • Support school heads with identifying Ebola exposure among children, teachers, and education personnel prior to school re-opening. • Review cases reported by the school head and refer them if necessary. • Issue 'Clearance Form' to children/persons who have completed their 21 day monitoring period and are eligible for returning to school. • Conduct investigations and contact tracing activities with the assistance of school head and education personnel. • Submit relevant data to school heads and/or to Fever Monitoring Committees as appropriate.
School heads	<ul style="list-style-type: none"> • Ensure information forms are received prior to school reopening and identify possible Ebola exposure of children, teachers and other education personnel. • Establish contact with the DHMT and the nearest health centre. • Maintain a list of parent's/care giver's contact details. • Establish communication with DHMT to coordinate children/persons returning to school after the completion of their 21 day monitoring period post-Ebola exposure. • Liaise with community mobilisers on needs and gaps related to messaging among parents and students. • After receiving information of exposure or a confirmed case from DHMT, inform the teacher in a confidential manner. • Maintain a record of the names of students, teachers and other education personnel who are confirmed Ebola cases. • Assist DHMT in conducting investigations and contact tracing activities following a confirmed case of Ebola in school. • Ensure appropriate cleaning and decontamination has occurred prior to school reopening and following a confirmed case of Ebola in school. • Contact the parents of any child found to have a fever or illness. • Co-opt members of CTA, communities, etc. into the Fever Monitoring Committee as required.
Fever Monitoring Team	<ul style="list-style-type: none"> • Ensure infrared thermometers are working and properly calibrated. • Monitoring of children's and teacher's temperatures on a daily basis. • Escort anyone feeling sick to the Safe Bay. • Stay with the child/person until DHMT/PHU comes to review the case. • Ensure Sick Bay is properly equipped and water available for hand washing stations.
Teachers	<ul style="list-style-type: none"> • Sensitize communities on Guidance Note & Protocols. • If requested by school heads, work with community members to complete forms prior to school opening.

	<ul style="list-style-type: none"> • Be vigilant and observe children closely throughout the day; identify sick children, escort them to the sick bay and follow the referral system. • Support the Fever Monitoring Team, if requested. • Promote hand-washing practices, as well as other identified measures to reduce transmission (e.g., not sharing eating utensils), at school. • Provide continuous psychosocial support to children.
Community mobilizers	<ul style="list-style-type: none"> • Sensitize communities on the Guidance Note & Protocols, new admission rules, referral system, and their roles and responsibilities. • If requested by school heads, work with community members to complete forms prior to school opening as needed. • Promote hand-washing and hygiene practices at school and home.
Communities	<ul style="list-style-type: none"> • Inform school head if child or members of the families are sick and do not send sick children to school. • Ensure children go to school on time/earlier if requested. • Cleaning of school premises. • Providing water for hand washing in school. • Support Fever Monitoring Team if requested. • Promote good hygiene rules at home. • Monitor the implementation of the Guidance Note & Protocols.

Annex B: Ebola Suspected Case Referral and Handling in Schools

