

**School Health**  
**Re-entry Guidance Document**

May 4, 2020

The following is guidance being developed by a small working group of the Lead School Nurses

- PPE & Equipment- ***Suggestions***
  - **Masks** Nurses
  - Sick Children
  - **Face shields**
  - **Gowns**
  - **Hand sanitizer**
  - **Hand soap**
  - **Disinfectant wipes**
  - **Disinfectant Spray EPA approved**
  - **Gloves (your preference)**
  - **Thermometers** (infrared, FDA approved)
  - **Other**
  - **Needs for Special Schools**
  
- Sick Day Guidelines (As of May 1, 2020)
  - Exclusion Criteria-Requiring Absence
    - Active vomiting or diarrhea
    - Fever/chills/generalized body aches
      - Fever threshold of 99.5 degrees Fahrenheit or higher
    - The first 24 hours of various antibiotic treatments (strep throat, pink eye, etc.)
    - Undiagnosed, new, and/or untreated rash or skin condition (i.e. generalized hives, wound with purulent drainage, etc)
    - Doctor's note requiring an individualized plan of care to stay home
  - Encourage students/staff to stay home if sick. If an individual presents to school with the above-mentioned "Sick Day Guideline" symptoms, they will be sent home.
  - COVID-19 Exposure:
    - If present with symptoms, isolate and send home
  - Attendance Policy
  - Return to School
    - First month after school reopens (may be extended)
      - Active vomiting or diarrhea - 72 hours since last episode

- Fever - 72 hours fever-free without the use of fever-reducing medication
  - After 24 hours on antibiotics for variety of bacterial causes
  - Doctor's note of clearance for various student-specific medical conditions
- After first month
  - Same as above, with exception that the 72 hour period is reduced to 24 hours
- COVID-19-Consider COVID-19 Assessment Tool
  - Students/staff with symptoms and isolated at home:
    - Return at least 72 hours after resolution of fever-reducing medication and improvement in respiratory symptoms
    - At least 7 days after symptoms first appeared
  - If diagnosed with COVID-19:
    - Refer to CDC protocol for return to school
- Health Room -
  - Health room visits-masks, gloves, hand sanitizer, shoe covers, alcohol, air purifier, thermometer; gowns, (would this be under PPE & Equip?)
    - Nurses will need to limit the amount of students in office at one time in order to maintain social distancing, with tape on floor 6ft. apart as a reminder for students to maintain distance.
    - Teachers will need to call the nurse prior to sending students to the nurse's office (consider phone triage, or computer notifications for availability of the nurse).
    - Educate the staff on only sending sick kids (The 6 **B**'s **B**reathing difficulty, **B**leeding a band aid won't cover, **B**roken/**B**lue extremity **B**ee sting, or **B**arfing)
    - Nurses must practice hand hygiene between each student with soap and water or alcohol based hand sanitizer.
    - Remove most non-nursing tasks from the nurse, ie. Changing of clothes relocated to another location, upset or anxious students will be sent to counselor or other designee, and feminine products will be available in the classroom discreetly for students.
  - Isolation
    - Need a separate (isolation) area for students with fever, respiratory symptoms.
    - Consult with school facilities department for clean air filtration system or preferably creating a negative pressure isolation room to reduce

- exposure.
  - Medication Administration
    - Stagger medication administration times to maintain social distancing.
    - Consider recommended fever reducing medication.
  - Nebulized Medications
    - Designated area to administer nebulized medications and/or perform nursing interventions that produce secretions (suctioning, gargling).
- Students/Staff with Medical Complexities-
  - Short term absence-
    - i. Does the change of placement apply after 10 days of missed school?
    - ii. Will we need MD notes for school exclusion?
    - lii. Will staff who are immunocompromised have to be redirected from interaction with students-perhaps online support? Medical notes?
  - Face coverings
    - i. Face shields for staff working with the spec ed population are the best option (staff working with this population will have to be included in the face shield count when districts are ordering PPE)
    - ii. Gowns should also be considered for staff working with this population
    - lii. Will not be feasible for students to wear masks
  - In class services (treatments in classroom)
    - i. Consider treatment area in nurse office using vinyl partition
    - ii. PDNs will need to be made aware of any policies/procedures the school initiates so they can comply
  - IDEA- what are the implications for students with IEP accommodations, how will homebound instruction look for students
- Communicable Disease Monitoring-
  - a. Screening:
    - Nurses will need to prepare to provide education on prevention, follow up and treatment for the public. This may be created in the form of pamphlets, videos, handouts...all approved by DPH/DHSS and DOE.
    - Nurses will need a “drop down” box in eSchool to document Covid-19 signs and symptoms. Nurses can generate a report for tracking purposes to collaborate with DPH.
    - We now have “pop up screening events” placed throughout the state where the public can be screened by answering questions to see if they need to be tested. These are “drive through” screenings taking place. See “tracking disease processes” for the follow up after these people are screened.
  - b. Tracking Disease Processes: DPH/DHSS have organized a tracking system in two parts. We have two teams working on interviews and follow-up with our

confirmed COVID cases. School nurses will be assigned to one of these teams • The first team is called “Epi Investigation team” and is currently primarily made up of epidemiologists and nurses. The Epi team reaches out to each COVID case and completes an initial interview that takes between 10 and 20 minutes and includes questions about symptoms, possible exposures (where did they get their COVID) and contacts (i.e. who might they have shared their COVID with) as well as employment information. Our goal is for each investigator on the epi team to make around 30 calls per day (shifts range from 7.5 to 10 hours). • When Epi has completed their interview, they hand the case over to the “Case Monitoring team,” who does a shorter call with the case every 2-3 days until their symptoms have resolved. This interview is simply: how are you feeling, what symptoms are you still having, and are you getting better, worse or staying the same. The monitoring team is comprised of a much wider variety of job titles and they make more calls each per day, and their workload is also more variable depending on how many people are in the queue at any given time. Team members will work at locations to be designated (social distance appropriate). Current locations are located in Smyrna and Dover. The data for all of these interviews are managed in an online electronic system called REDCap - training for the program and the teams will be provided. NOTE: Nurses will need more guidance on how to screen and track our school population. This will include staff and students. Submitted by: SEL & KAK

- Physical & Immunization Requirements-  
**NASN statement:** “State level advocacy to allow provisional extensions of 2019-2020 health plans/medical orders, school physicals, immunization requirements and suspensions of mandated state screenings. 1. Partner with state school nurse consultants, state and local health departments, and state departments of education, state government, healthcare systems, & American Academy of Pediatrics local Chapter.”
  - Pre-K & KN entry ( **Districts are working on how to facilitate PRE K and K registration, but this depends on the governor/ parents can do online registration**)
  - New student : **14 days to provide the requirements or an appointment date, consider no exclusion due to appointment availability**
  - High school entry ( **9th grade physicals and immunization requirement: 30 days from first day of school/ as long as they have an appointment, consider no exclusion, due to appointment availability**)
  - DIAA-DIAA Sports Medicine Advisory Committee (SMAC) working on this with DOE: Lori Hoffman, School Nurse with Red Clay & Barbara Cilento,

School Nurse with Cape serving on SMAC committee already

- Reviewing NFHS documents sent by Barb Cilento which has athletic PPE recommendations in light of COVID19.
- DIAA has a meeting scheduled for next week - Thursday? MAY 14
- Education -
  - The school nurse will provide health education to the school community regarding COVID19 and resulting policies, procedures, and protocols. This education will address prevention, screening, social distancing, sick day criteria, etc. This education will also address changes to existing practices. The school community will include administration, faculty, staff, facilities, parents and students.
  - Health education posters and print materials will be utilized to emphasize communicable disease and specifically COVID19 prevention measures.
- Classroom-District level decisions; School Nurse may consult
  - Class size (social distancing tactics)
  - Hallway Traffic
  - Recess restructuring
  - After school activities
    - **No pod seating or team seating, all students face forward with space between desks? We did this at Mispillion in some classes during flu season. (SS)**
- Nutrition Services-District level decisions; School Nurse may consult
  - Handwashing stations
  - Social distancing (eat in classroom)
  - Protection of cashier/nutrition staff
  - Wiping down tables between seating
    - **Staff enter student ID into the key pad to decrease the number of students touching the keypad ( SS)**
- Transportation-District level decisions; School Nurse may consult
  - Social distancing
  - PPE needs (Masks for bus drivers: contractor responsibility?)
  - Disinfecting buses between transports
- Environmental Care Services-District level decisions; School Nurse may consult
  - PPE for cleaning
  - Cleaning supplies approved for COVID- hand sanitizer #; soap; paper towels; Clorox/water spray for surface cleaning; Lysol; gloves ; divider/screen for

office;

Resources:

National Association of School Nurses (4/29/20). *Interim Guidance: Role of the school nurse in return to school planning*. Retrieved from [https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/COVID-19 Interim Guidance Role of the School Nurse in Return to School Planning.pdf](https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/COVID-19%20Interim%20Guidance%20Role%20of%20the%20School%20Nurse%20in%20Return%20to%20School%20Planning.pdf)