COVID-19 Considerations for Reopening Schools:
Workplace Health and Safety
July 6, 2020

Returning to school during a global pandemic brings a new level of anxiety for everyone involved. Even though most children are very resilient to COVID-19, many parents/guardians have valid concerns that the student could carry the virus home to vulnerable family members or others living in the home.

The decision to return to school is dependent on the capability of the district to maintain a safe and healthy environment. The Kentucky Department of Education (KDE) has developed this guidance document as a companion piece to the Kentucky Department for Public Health's "Guidance on Safety Expectations and Best Practices for Kentucky Schools (K-12)." It is intended to be a guide for local school districts when developing and adapting their return-to-school plans.

This is not a "one size fits all" guide and is based on best practice guidance and information from relevant state and federal agencies. However, due to the nature of COVID-19, this is ever-evolving information and districts should work closely with their local health departments and other partners to ensure their policies, procedures and protocols align with the current scientific information. As the situation evolves, it is expected that those plans will need to be re-evaluated and adjusted as necessary.

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Health and Safety Team

COVID-19 Response Team
The U.S. Centers for Disease Control and Prevention (CDC) has developed a Readiness and Planning Tool to share ways district and school administrators can protect students and staff and slow the spread of COVID-19. This tool is aligned with the CDC's Considerations for Schools and will help planners meet the unique needs of a particular district.

Helpful links:
CDC - Interim Guidance for Businesses and Employers
CDC - Interim Guidance for Administrators of U.S. K-12 Schools and Child Care Programs

The Readiness and Planning Tool is divided into four categories:

- General Readiness Assessment
- Daily/Weekly Readiness Assessment
- Preparing for if Someone Gets Sick
- Special Considerations

Each assessment focuses on policies and procedures, facilities and supplies, education and training, and communications and messaging. Each category has a designated point person and a checklist of considerations for planning. These designated points of contact, along with the district superintendent, should form the core COVID-19 planning team that was mentioned in the initial guidance published on May 15. As noted in that guidance document as well as in this planning tool, the local health department plays an important role in advising the district as health guidelines may change depending on local conditions.

Considerations for District Planning

- Districts are encouraged to start planning for the additional communications that will be needed related to COVID-19. Technology, videos and social media can be used to get vital information to parents, staff and other stakeholders.
- Districts already should have a flu plan in place they follow during outbreaks of flu. This should be the basis for their COVID-19 response plan. The plan should include a health screening protocol for both students and staff. The district also should have a plan to respond to any student or staff directly exposed to COVID-19, as well as guidelines for dealing with a student or staff member who tests positive for COVID-19. It is critical that

district health coordinators and school nurses are an integral part of the development of this plan.

- Districts should work with the local health officials to understand the role of the school in the contact tracing process.
- Districts should work closely with local health departments to develop informational letters, flyers and other communications regarding COVID-19, and on when health-related notifications should be sent home to parents and caregivers.
- Student health requirements (immunizations, school physical, dental and vision exams) have not changed. However, there may be students who may not be up to date on those exams and immunizations. Schools should work closely to assist families in obtaining the needed exams and immunizations in a timely manner.
- Due to the increased need for medical assessments of students and staff, districts are encouraged to place a full-time nurse in each school. The use of licensed practical nurses or an experienced health aid – both of whom can provide care under the direction of a district registered nurse – may be a cost-effective option.

Health Resources and Support

School Nurse Consultant
The KDE state school nurse consultant provides leadership and assistance to local school districts relating to student health services. The state school nurse consultant also provides consultation, technical assistance and development of quality improvement measures for state and local school boards.

As part of KDE's response to COVID-19, the state school nurse consultant has been working with the Kentucky Department for Public Health, superintendents, district health coordinators, school nurses and other stakeholders to keep them up to date on the latest best practice guidelines and recommendations from relevant national, federal and state resources, as well as providing guidance on the development of school COVID-19 plans.

Helpful Link:
National Association of State School Nurse Consultants - "Interim Guidance on the Role of the State School Nurse Consultant – Return to School Planning"

Additional Duties for the School Nurse in Response to COVID-19
- Develop a flowchart regarding when students and staff should be isolated and sent home. This will assist other school health services staff (LPNs, CNAs, CMT) in making the flow of the health room as effective and efficient as possible.
- Frequently inventory needed supplies and personal protective equipment (PPE) for the health room and report to your facilities and supplies point person.
- Develop and provide training to staff, students and parents on COVID-19 and its symptoms, along with social distancing and how to wear, put on and take off PPE.

- Develop protocols for when to send students to the nurse. Determine what tasks can be taken care of in the classroom and develop a communication plan between the teachers and the school nurse before sending students to the health room.
- Develop a referral process to confirm school entry for students with known special health concerns, including individuals who are immunocompromised.
- Develop individualized health care plans for at-risk students. Advocate for at-risk students and facilitate consideration for alternative education if best for student.
- Recognize and assess the fear and anxiety of students regarding COVID-19 and/or returning to school and make referrals to school counselor as needed.
- Work with building-level administration to implement the school's COVID-19 plan.
- Participate in contact tracing per district protocol.

Helpful links:
Allergy and Asthma Network - "Asthma Care at School Post COVID-19 Outbreak" flowchart
National Association of School Nurses - "Interim Guidance: Role of the School Nurse in Return to School Planning"

School Health Room
- It is imperative that each school have a dedicated school health room. Proper ventilation is key for a healthy environment. Ideally the school health room would have a private bathroom, a sink with running water and windows that could be opened to promote ventilation. At a minimum, this space should include a sink with running water so the school health staff can have proper hand hygiene while caring for students and staff.
- Health room space may present a challenge for older school buildings. Accommodations must be made to for infection control measures to prevent the spread of COVID-19 and other diseases. The health room may need to be relocated to accommodate the increased use and need to isolate those that are ill. If unable to separate ill students, consider other options such as hanging vinyl shower curtains as a divider that can be wiped down between students. The divider provides privacy and serves as a barrier.
- Students and staff exhibiting signs and symptoms of illness should be separated from healthy students and staff while waiting to go home. A separate isolation area (where students can be supervised) is recommended to help limit exposure. Determine who will monitor the isolation area.
- Health room supplies should include gloves, face masks, face shields and protective gowns, bonnets and shoe protectors (booties).
- Priority should be given to provide adequate health room supplies for school nurse and other school health service staff.
- In addition to regular sanitization by custodial staff, frequent-use items like chairs and cots should be sanitized by the health staff after each use. A thorough cleaning of all surfaces in the health room must be done daily by custodial staff in accordance with the

building's space inventory as described in KDE's "Phase II Consideration for Reopening Schools: Facilities and Logistics" guidance document.

- Consider having a first aid and medication station outside the health office for students who are well and use the health room space for ill students. This can be staffed by unlicensed school personnel who have proper first aid and medication administration training.

Mitigation Strategies

PPE
According to the Occupational Safety and Health Administration (OSHA), personal protective equipment (PPE) is equipment worn to minimize exposure to hazards that cause serious workplace injuries and illnesses. The CDC states PPE should be used every day by healthcare personnel to protect themselves, patients and others when providing care, including gowns, gloves, surgical masks, respirators and face shields.

The school nurse and other health services staff should wear appropriate PPE when working with students and staff. The school nurse should closely monitor the PPE inventory in the health room and follow the procurement procedures for reordering.

Helpful links:
CDC – "Strategies to Optimize the Supply of PPE and Equipment"
National Association of School Nurses - "Facemask Considerations for Healthcare Professionals in Schools"
CDC - "When to Wear Gloves"
CDC – "Using Personal Protective Equipment (PPE)" – includes posters and training videos

Masks
All students in the 1st grade and up should wear a cloth mask unless the student has a medical exemption. Wearing of cloth masks is strongly recommended as they protect individuals if the wearer unknowingly is infectious. Face coverings are essential when proper social distancing is difficult. Schools will need to consider the mask as a part of school attire and include it in school dress code policy for appropriate governance of decorations, logos, screen prints, etc. Schools should consider positive interventions to work with students who choose not to wear a mask.

NOTE: Face coverings should **not** be used in the following situations:
- o Anyone who has trouble breathing or is unconscious;
- o Children under the age of 2;
- o Anyone who is incapacitated and unable to remove the covering without assistance; and

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- Anyone with underlying medical, developmental, sensory or behavioral health issues that may preclude wearing a mask.

Although not as effective as a face mask, face shields should be considered for those who have an exemption from wearing a mask.

Helpful links:
CDC - How to Wear Cloth Face Coverings
CDC - "Use of Cloth Face Coverings to Help Slow the Spread of COVID-19"
CDC – "Using Personal Protective Equipment (PPE)" – includes posters and training videos

Hand Hygiene
Students should be taught proper hand hygiene practices. Signs and reminders should be posted throughout buildings. Regular breaks for handwashing and use of hand sanitizer should be planned into the school day. Those wearing masks should be reminded not to touch their face. Students should cough or sneeze into a tissue, immediately throw the tissue away and wash or sanitize their hands.

Helpful link:
CDC – "When and How to Wash Your Hands"

Social Distancing
Since it is currently believed that COVID-19 is transmitted through respiratory droplets, social distancing (spreading people at minimum 6 feet apart) is a very important strategy to slow the spread of the virus. It is encouraged that social distancing be practiced as much as feasible in the school setting. To help do so:
- Utilize markings on floors to determine 6 feet spacing.
- Use assigned entrance/exits for a predetermined group of classrooms.
- Use self-contained classrooms, if feasible, to limit exposure to a small group of students/staff.
- Have breaks/recess outside, and open windows where feasible to help improve ventilation.
- Clean classrooms during the time students are out of the room.
- Limit non-essential visitors and activities with outside groups and organization when possible. Students requiring outside services – such as mental health, speech, occupational and physical therapies – are allowed, but service providers must follow screening protocol and must wear proper PPE.

Helpful link:
CDC - "Social Distancing"

Temperatures
Conduct temperature screenings for students and staff entering the building (or boarding the bus) and as needed. Fever is determined by a temperature of greater than100.4 degrees. Depending on the level of cases in the community, the local health department may recommend sending students home with a lower temperature.

- Use non-touch thermometers if possible. If non-touch thermometers are not available, a temporal, axillary or tympanic thermometer should be used. Use disposable covers, which should be changed after each use. Avoid the use of oral thermometers as they could spread respiratory droplets.
- Students/staff should wait at least 6 feet apart and temperature stations should be spread out in different locations to prevent individuals from congregating.

The district should develop and communicate to students and staff the procedure for taking temperatures at entry and that if the temperature exceeds the 100.4 degree threshold, they will be sent home.

Employee Health and Wellness

Health Self-Assessment
Employees must stay home if they are ill.

Upon arrival at school, district employees should complete a quick health self-assessment for common COVID-19 symptoms, including temperature check. An example of an employee health screening form is in Appendix A. If there are no symptoms or fever, the employee should proceed to work as normal.

If an employee exhibits at least one symptom (fever, chills, shortness of breath/difficulty breathing, new cough, new loss of taste or smell, gastrointestinal symptoms), the employee must immediately go home and should notify their health care provider. If a person suspects they may have been exposed to COVID-19, that person should be tested immediately and then begin a quarantine period until test results are available.

It is recommended that the district develop a protocol for how to handle employees who have been exposed to a person with COVID-19 or employees who have tested positive for COVID-19. At a minimum, the protocol should address:
- Notification to supervisor of a COVID-19-related absence;
- Required quarantine or isolation when sick;
- Notification to the local health department;
- Provision of relevant data to the contact tracing team;
- Recovery and return to work criteria for both symptomatic and asymptomatic cases;
- Leave options; and

- Remote work option, if feasible.

If an employee with symptoms has a negative COVID-19 test, they may return to work once they are fever-free (without fever-reducing medication) for 72 hours and have no other COVID-19-related symptoms.

If an employee develops symptoms during the workday, the immediate supervisor should be notified and the employee must go home immediately. The school nurse, if available, also may be contacted for an assessment of the employee. The employee should notify their health care provider. If a person suspects they may have been exposed to COVID-19, that person should be tested immediately and then begin a quarantine period until test results are available.

Helpful links:
National Association of School Nurses - "Considerations for School Nurses Regarding Care of Students and Staff that Become Ill at School or Arrive Sick"

CDC – "What School Nutrition Professionals and Volunteers at Schools Need to Know about COVID-19"

Student Health and Wellness

Health Assessment at School
Parents should complete a quick health assessment, including a temperature check, before sending their student to school. For students who ride the bus, verification of this health assessment is required for students to board the bus without a temperature screening. An example of the parental health assurance is in Appendix B. If there are no symptoms observed, the student should proceed to school as normal regardless of transportation mode.

The district should develop and communicate to families the procedure for daily entry to the school building. The procedure should include information on traffic patterns, start times, which entrances to use and any other details pertinent to an orderly entrance so temperatures may be scanned.

The district's student health screening protocol should require a temperature screening prior to entry into the school building. The screening may occur on the bus if there are resources available. The protocol should include guidelines to manage students who exhibit COVID-19 symptoms at any point during the school day until a parent or guardian can pick them up.

If a student shows at least one symptom (fever, chills, shortness of breath/difficulty breathing, new cough, new loss of taste or smell or gastrointestinal symptoms), the student must be isolated immediately until the parent can pick up the child. The parents should be encouraged to notify their health care provider for further guidance and possible testing for COVID-19.

It is recommended that the district develop a protocol for how to handle students who have been exposed to a person who is infectious with COVID-19 or students who have tested positive for COVID-19. At a minimum, the protocol should address:

- Notification to the school of a COVID-19 related absence;
- Required quarantine or isolation when sick;
- Notification to the local health department;
- Provision of relevant data to the contact tracing team;
- Recovery and return to school criteria for both symptomatic and asymptomatic cases; and
- A remote instruction option, if feasible.

A student sent home with COVID-19 symptoms who has a negative COVID-19 test or the symptoms have subsided may return to school once they are fever-free (without fever reducing medication) for 72 hours and have no other COVID-19 related symptoms.

Helpful link:
National Association of School Nurses - "Considerations for School Nurses Regarding Care of Students and Staff that Become Ill at School or Arrive Sick"

Other Resources:
CDC – "Communication Resources"
OSHA - "Guidance on Preparing Workplaces for COVID-19"

Appendix A: Sample Parental Assurance for Student Health

Parental Assurance for Daily Student Health Assessment
for School Year 2020-2021

I agree to perform the following health assessment on a daily basis before allowing my child to attend school in-person or to board the bus for transportation to school:

- Temperature greater than 100.4
- Cough
- GI symptoms (vomiting/diarrhea)
- New rash
- Exposure to a COVID-19 case during the prior 48-hour period

If any of these symptoms are present, I assure the *<District Name>* that my child will not attend school on the day these symptoms are present. I will notify the school of my child's absence. If my child develops any of these symptoms during the school day, I assure the district that I, or my designee, will pick up my child as soon as possible.

Student Name: _____

Guardian Signature: _____

Date: _____

Appendix B: Sample Employee Health Self-Assessment Form

COVID-19 Employee Health Self-Assessment Form

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Employee Name:		PERNR or Employee ID:	
Agency:			

Each day, before beginning your shift, please self-assess for the below symptoms. If you check "Y" for yes, please contact your supervisor and do not proceed to your duty location until directed otherwise. At the end of each pay period, please sign the form and turn it in to your agency Human Resources (HR) office.

Date	Fever of 100.5 ° F or more	Cough	Shortness of Breath	Chills	Muscle Pain	Sore Throat	New loss of taste or smell	Gastrointestinal Symptoms (Vomiting, Diarrhea, etc.)
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
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	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N
	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N	☐Y ☐N

Employee Signature: _____ Date: _____