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# **Purpose**

The purpose of this document is to provide public health guidance to schools based upon the guidance issued by the Pennsylvania Department of Education (PDE) for the phased re-opening of pre-K to 12 schools.

# **Health and Safety Considerations**

The following health and safety considerations were taken directly from the [*Preliminary Guidance for Phased Reopening of Pre-K to 12 Schools*](https://www.education.pa.gov/Documents/K-12/Safe%20Schools/COVID/GuidanceDocuments/Pre-K%20to%2012%20Reopening%20Guidance.pdf) published by the Pennsylvania Department of Education. Guidance specific to public health is provided for each consideration.

| **PDE Considerations** | **Public Health Guidance** |
| --- | --- |
| **Pandemic Team** |
| Identification of a “pandemic coordinator” and/or “pandemic team” with defined roles and responsibilities for health and safety preparedness and response planning | * Chester County Health Department will serve as a resource/ consultant to schools:

Jeanne Casner, MPH, PMPCounty Public Health Director |
| **Cleaning, Sanitizing, Disinfecting, and Ventilation** |
| Procedures for cleaning, sanitizing, disinfecting, and ventilating learning spaces and any other areas used by students (i.e. restrooms, hallways, and transportation) | * Cleaning, sanitizing, disinfecting and ventilating guidelines apply to areas used by anyone on school property, not just students.
* Disinfect frequently touched surfaces and objects within the school at least daily, including desktops, chairs, electronic devices door handles, sink handles, etc.
* Disinfect frequently touched surfaces on school buses such as handrails, tops of seats, etc. after each run; clean and disinfect entire bus daily.
* Clean shared equipment including but not limited to technology, gym equipment, etc. after each use.
* Use disposable gloves when cleaning and disinfecting and dispose immediately.
* Ensure ventilation systems operate properly and increase circulation of outdoor air by opening windows in places that do not conflict with the school’s existing safety measures and do not pose a health and safety risk to staff and students,
* Make hand sanitizer available in common areas, hallways, and classrooms where sinks for handwashing are not available.
* Provide continuous reminders/education about hand washing/sanitation.
* Staff and students wash hands before and after lunch/snacks.
* Discontinue the use of drinking fountains and provide safe alternatives for providing water when possible; alternatives include use of disposal drinking cups, personal water bottles from home, touchless fountains, etc.
* When someone in the school develops COVID-19 symptoms, or tests positive for COVID-19:
	+ The building does not need to be evacuated.
	+ Close off areas used by a sick person and do not use these areas until after [cleaning and disinfecting](https://www.cdc.gov/coronavirus/2019-ncov/community/clean-disinfect/index.html).
	+ Wait at least 24 hours before cleaning and disinfecting. If not feasible, wait as long as possible. If seven days have passed since the individual was in the affected area, cleaning is not needed.
* See [CDC’s guidance for cleaning and disinfecting](https://www.cdc.gov/coronavirus/2019-ncov/community/clean-disinfect/index.html) for additional information.
 |
| **Social Distancing & Other Safety Protocols** |
| Classroom/ learning space occupancy that allows for 6 feet of separation among students and staff throughout the day, to the maximum extent feasible | * Staggered schedules to limit the number of individuals in classrooms and other spaces is optimal.
* Regardless of staggered or non-staggered schedules, six feet between students, staff, and faculty must be maintained in classrooms and spaces that can physically support the distance; for classrooms and spaces that cannot support six feet, three feet is the minimum.
* Cohort classes to minimize crossover among students and staff within the school; or keep students in classrooms and rotate staff instead.
* Maximize use of non-classroom space to increase physical distancing.
* In classrooms and spaces where six feet cannot be maintained, the use of face coverings is imperative.
* Turn desks to face in the same direction or have students sit on only one side of tables to limit face-to-face seating.
* Limit activities in classrooms and other spaces that do not support physical distancing.
* Enforce physical distancing in offices and staff lounges, and during staff meetings.
* Limit large gatherings, events, and extracurricular activities to those that can maintain physical distancing.
* Implement strategies to reduce the number of individuals in the hallways at one time such as:
	+ Use one-way traffic patterns to include physical guides such as tape, for routes
	+ Stagger end of class periods to reduce the number of students in the hallways at one time
	+ For older students, consider requiring masks when in hallways and restrooms.
* Monitor school to ensure staff or students do not commune; close communal areas if needed.
 |
| Restrict the use of cafeterias and other congregate settings, and serving meals in alternate settings such as classrooms | * Schools can utilize cafeterias if students can sit in staggered arrangement to avoid “across-the-table” seating with three feet physical separation, or all students face in one direction with six feet physical distance.
* Schools not able to utilize cafeterias as specified above will use classrooms for lunch and use plated meals/box lunches and avoid buffet style meals.
* Staff avoid face-to-face seating while eating.
* Staff and students avoid sharing of food and utensils.
* Compliance with Chester County Rules and Regulations, Chapter 300, is required as well as additional COVID-19 guidelines provided by Chester County Health Department.
 |
| Hygiene practices for students and staff including the manner and frequency of hand-washing and other best practices | * Teach and reinforce frequent washing hands/hand sanitation, covering coughs and sneezes among students, staff, faculty, volunteers and visitors.
* Staff, faculty and students wash hands before and after lunch/snacks, and after use of restroom.
* Hygiene reminders are posted throughout the facility, to include restrooms, staff lounges, etc.
* Hand sanitizer will be made available in all common areas, hallways, and/or in classrooms where sinks for handwashing are not available.
* Prohibit physical contact such as handshakes, fist-bumps, high-fives, etc.
 |
| Posting signs, in highly visible locations, that promote everyday protective measures, and how to stop the spread of germs | * Visual/written information about everyday protective measures such as by proper washing hands, proper face covering and physical distancing is available throughout the school (signage, announcements, etc.) is posted throughout facilities and buses, and made available to parents/guardians (websites, emails, etc.).
* Verbal reminders via teachers and/or announcements are made daily.
 |
| Identifying and restricting non-essential visitors and volunteers | * Restrict non-essential visitors, volunteers, and activities that involve outside groups.
* If non-essential visitors and volunteers cannot be restricted, school must:
	+ conduct on-site screening for symptoms and temperature prior to entry
	+ require face covering while on school property
	+ track visitors and volunteers for contact tracing purposes.
 |
| Handling sporting activities for recess and physical education classes consistent with the CDC Considerations for Youth Sports | * Stagger use of playgrounds to create smaller groups of students.
* Clean high touch services on playground equipment and play resources (jump ropes, balls, etc.) after each use (minimum daily).
* For additional sports and athletic guidance see: [Chester County Health Department guidance for sports related activities](https://www.chesco.org/DocumentCenter/View/55626/Organized-Sports-in-Green-COVID-Phase?bidId=).
 |
| Limiting the sharing of materials among students | * Keep each student’s belongings separated from others and in individually labeled containers, cubbies, lockers or other areas.
 |
| Adjusting transportation schedules and practices to create social distance between students | * Encourage families to drive students to school.
* Seat a maximum of students per seat; students from the same family should sit together.
* Use assigned seats (knowing who is seated near and individual will support contact tracing).
* Use markings that shows students where to sit in each row – inside and outside seats of each bench.
* Bus drivers must wear face covering whenever others are on the bus; or barrier between the driver and students must be present.
* Required all riders to face forward throughout the route.
* Reserve the first seat for students who board the bus and look visibly ill, or for students who exhibit/express illness while in route.
* Wear gloves when assisting students on and off the bus.
* Follow same guidance for face covering while on school property.
 |
| Limiting the number of individuals in classrooms and other learning spaces, and interactions between groups of students | * See “Classroom/learning space occupancy…” above.

  |
| Coordinating with local childcare regarding on site care, transportation protocol changes and, when possible, revised hours of operation or modified school-year calendars | * Require on-site before and after care providers to follow requirements of the school’s COVID-19 health and safety plan.
 |
| Other social distancing and safety practices | * Refrain from scheduling large group activities such as field trips, inter-group events, and extracurricular activities.
* Limit movement in and out of classrooms with high-risk students.
 |
| **Monitoring Student and Staff Health** |
| Monitoring students and staff for symptoms and history of exposure | * Provide ongoing education and communications to students, staff and parents/guardians about the importance of staying at home if they are ill.
* On-site screening of staff, faculty and students is preferred and highly recommended by the Chester County Health Department – see [Symptom Monitoring](#_Symptom_Monitoring).
* If on-site screening cannot be implemented, staff, faculty and students must be screened at home. Direct guidance (written, video, electronic, etc.) must be provided to staff and parents/guardians to include:
	+ All current, relevant symptoms – see [Symptom Monitoring](#_Symptom_Monitoring).
	+ Temperatures must be based upon type of thermometer – see [Symptom Monitoring](#_Symptom_Monitoring).
* On-site screening for symptoms and temperature is required for all non-essential visitors and volunteers – see [Symptom Monitoring](#_Symptom_Monitoring).
* No students with symptoms or elevated temperature are allowed on a bus, or at school.
* No staff or faculty with symptoms or elevated temperature are allowed at school.
* Staff, faculty and students must notify the school if an absence is due to COVID-19.
* Monitor symptoms of students, staff and visitors throughout the day; proactively monitor classrooms, cafeterias, hallways, common areas, etc. for symptoms and compliance with other prevention measures.
 |
|  | * Provide reminders to students about COVID-19 symptoms and importance of immediately going to the nurse if feeling ill; daily reminders to staff and faculty about COVID-19 symptoms and importance of immediately going home if feeling ill.
* Empower and support teachers in dismissing students to the school nurse/office if symptoms arise or are suspected.
* Send regular reminder messages to staff and parents/guardians about daily symptom monitoring.
* Students boarding buses with visible symptoms must sit in the first seat and must immediately report to the school nurse/office upon arrival at the school.
* Establish a process for staff, parents/guardians and volunteers to self-report COVID-19 symptoms or exposure to the school nurse, or designee.
* Any individual on school property who develops COVID-19 symptoms, tests positive for COVID-19, or is suspect for COVID-19 must be directed immediately to the isolation room/area of the school until dismissal from school is possible. School must following guidance in Cleaning, Sanitizing, Disinfecting, and Ventilation section.
 |
| Isolating or quarantining students, staff, or visitors if they become sick or demonstrate a history of exposure | * Designate an isolation room/area to separate anyone who exhibits COVID-19-like symptoms until the individual is able to go home, or to a healthcare provider; the isolation room/area should not be the existing nurse’s office.
* If a separate isolation room is not attainable, the nurse’s office can be used if space permits barriers to be installed to avoid comingling of students with and without COVID-19 symptoms.
* Immediately separate individuals with COVID-19 symptoms, or report of COVID-19 test into the designated isolation area.
	+ Face covering is required for individuals sent to the isolation area.
	+ Staff assisting individuals in the isolation area must were mask, eye protection, gloves, and gown; ensure proper use and disposal of personal protective equipment.
* Immediately [Report suspect or confirmed COVID individuals the Chester County Health Department](#_Reporting,_Investigation_and).
* Immediately close off the area(s) used by a sick person and do not use before cleaning and disinfection – see [Cleaning, Sanitizing, Disinfecting, and Ventilation](#_Cleaning,_Sanitizing,_Disinfecting,).
* Individuals who are sick or have an elevated temperature must go home, or to a healthcare facility depending on how severe their symptoms are; prior to leaving the school, provide guidance for self-isolation at home and returning to school – see [Home Guidance](https://www.chesco.org/DocumentCenter/View/54466/COVID-19-Caregiver) and [Exclusion From and Return to School Requirements.](#_Exclusion_From_and_2)
* If an individual requires transportation by an ambulance, alert the ambulance and hospital that the person may have COVID-19.
* Thoroughly clean and disinfect isolation room after each use.
* Train staff on the symptoms and procedure for sending individuals with symptoms to the school nurse or designee; ensure parents/guardians are aware of the classroom protocol.
* Educate and encourage parents to be prepared in the event their student has to stay home per the exclusion requirements.
	+ Schools should consider remote learning for students excluded from school who are well enough to continue learning.
* Maintain adequate personal protective equipment for use when individuals become ill: gowns, N95 masks, eye protection, gloves.
 |
| Returning isolated or quarantined staff, students, or visitors to school | * Each individual who is isolated or quarantined will be provided the appropriate information and timeline for isolation/quarantine by the Chester County Health Department following the [Exclusion From and Return to School Requirements](#_Exclusion_From_and).
* Individuals returning to school after isolation or quarantine should notify the school prior to return.
 |
| Notifying staff, families, and the public of school closures and within-school-year changes in safety protocols | * Consult with the Chester County Health Department prior to school closures and within-school-year changes in safety protocols.
 |
| Other monitoring and screening practices | * Partner with the Chester County Health Department to support [contact tracing](#_Contact_Tracing_for).
 |
| **Other Considerations** |
| Protecting students and staff at higher risk for severe illness | * Conduct temperature checks at school for high-risk students and staff, as well as the staff responsible for working with high-risk students; consult with the school nurse regarding high-risk students; high-risk students and staff include those who have high-risk household members.
* Enforce face coverings for adults working in classrooms with high-risk individuals
* Staff with higher risks should avoid gathering in groups of any size and avoid common areas such as staff lounges, and ensure diligence with face coverings.
* Limit movement in and out of classrooms with high-risk students.
 |
| Use of face coverings (masks or face shields) by all staff | * Universal face coverings is required for all adults while on school property, or when using school vehicles
	+ It is recognized that some individuals may be unable to wear masks to personal ability, age, health conditions, etc.
* If universal face coverings is not possible, face covering when in hallways, restrooms and areas where physical distancing is not possible is required (excluding those unable to wear masks due to personal ability, age, health, etc.)
* If an adult is in a work-space/vehicle alone, removing the face cover is acceptable.
* If an adult is in a shared work-space, removing the face cover is acceptable when 6 feet distance can be maintained, or physical barriers are in place.
* All bus drivers must wear face coverings (mask or shield) while on the bus or in the presence of students and staff.
* Share mask covering guidance with staff, faculty, volunteers, and visitors – see [Mask Guidance](https://www.chesco.org/4458/Coronavirus-COVID-19-Face-Mask-Guidance).
	+ Fabric masks should be washed regularly
	+ Non fabric masks should be changed regularly, or when soiled.
 |
| Use of face coverings (masks or face shields) by older students (as appropriate) | * Universal face coverings is required for all students while on school property, or when using school vehicles
	+ It is recognized that some students may be unable to wear masks due personal ability, age, health conditions, etc.
* If universal face coverings is not possible, face covering when in hallways, restrooms and areas where physical distancing is not possible is required (excluding those unable to wear masks due to personal ability, age, health conditions, etc.)
* Share mask covering guidance with students and families – see [Mask Guidance](https://www.chesco.org/4458/Coronavirus-COVID-19-Face-Mask-Guidance).
	+ Fabric masks should be washed regularly
	+ Non fabric masks should be changed regularly, or when soiled.
 |
| Unique safety protocols for students with complex needs or other vulnerable individuals | * Update care plans and/or IEPs to include unique mitigation strategies for individual students.
* Ensure families who choose to not send their children to school receive remote learning opportunities aligning with IEP guidelines.
* Leverage classroom supports (e.g. teacher aides) for students who need special assistance with hygiene measures.
* Enforce face coverings, gloves, gowns for adults working with students with complex need, or vulnerable students, particularly when working one-on-one with students.
* Face shields are better for staff and students with hearing impairment.
* Increase frequency of cleaning high touch surfaces in spaces used by students with complex needs or other vulnerabilities.
* Increase frequency of hand washing for students with complex needs or other vulnerabilities, and staff that interact with them.
* Temperature and daily health checks of staff and students in special needs classrooms.
 |
| Organized sports | * The decision to resume sports-related activities, including conditioning, practices and games, is the discretion of a school entity’s governing body. Each school entity must develop and adopt an Athletics Health and Safety Plan per [Pennsylvania Guidance](https://www.governor.pa.gov/covid-19/sports-guidance/).
* Follow [Chester County Health Department guidance for sports related activities](https://www.chesco.org/DocumentCenter/View/55626/Organized-Sports-in-Green-COVID-Phase?bidId=).
 |

# **Symptom Monitoring**

* Take temperature with temporal or forehead touchless thermometer
* Are you taking any medication to treat or suppress a fever? Yes/No
* Are you currently experiencing any of the following symptoms1?

|  |  |
| --- | --- |
| **Group A**1 or more symptoms | **Group B**2 or more symptoms |
| Fever2 CoughShortness of breathDifficulty breathing | Lack of smell or taste (without congestion) Sore throat Chills Muscle pain | HeadacheCongestion or runny noseNausea or vomitingDiarrhea |

"Has Symptoms” is defined as having 1 or more symptom(s) in Group A

**OR** 2 or more symptoms in Group B

**OR** Yes to medication to suppress a fever.

1 Elevated temperature is based For a current list of symptoms see CDC’s website: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>. Individuals with a known chronic condition that presents symptoms like those in either Group A or B will be exempt with a documentation from a physician.

2 Elevated temperature is based upon the mode by which the temperature obtained. Any elevated fever reported by an employee, even if no thermometer was used, should be considered as symptomatic.

|  |  |
| --- | --- |
| **Mode** | **Temperature for Fever** |
| Walk through scanner | 97.5°F or higher |
| Axillary and temporal | 99.5°F or higher |
| Oral | 100.0°F or higher |

# **Reporting COVID-19**

Coronavirus must be reported to the Chester County Health Department to ensure an investigation and contact tracing can be conducted.

Schools must anticipate reports of COVID-19 will be received directly from parents/caretaker, students, staff, or rumors. All reports must be taken seriously and require the following actions:

* If the individual(s) involved are not on school property, they must be contacted to by the school to remain off school property until they seek care from a healthcare provider (for those with symptoms) or are provided return to school guidance from the Chester County Health Department (for those reporting positive test result, or are a close contact).
* If the individual(s) involved are on school property, they must be sent to the isolation room/area of the school – see [Monitoring Student and Staff Health](#_Monitoring_Student_and) and [Cleaning, Sanitizing, Disinfecting, and Ventilation](#_Cleaning,_Sanitizing,_Disinfecting,).
* The school nurse or designee must submit COVID-19 reports to the Chester County Health – see [Reporting COVID-19](#_Reporting,_Investigation_and).
* The district/school should consider sharing a standard communication to the community at the time of the FIRST confirmed positives test result – see Sample Community Communication (*pending*). It is not advised that schools communicate about every COVID-19 report or subsequent positive test result. The Chester County Health Department will collaborate with schools for public communications to ensure accuracy and consistency.

**What to Report**

Immediately report all **suspect** and **confirmed** reports of COVID-19 in **students, staff, faculty, volunteers or visitors** to the Chester County Health Department while maintaining confidentiality. A suspect report could include a verbal illness report from a parent or caretaker, student, or teacher. A confirmed report could include a report from a healthcare provider’s office or doctor’s note.

**How to Report**

The Chester County Health Department requests that school nurses be the primary point of contact for reporting suspect or confirmed reports of COVID-19.

School nurses or designee when a nurse is unavailable must complete a [COVID-19 Disease Report Form](https://forms.chesco.org/iFiller/iFiller.jsp?fref=7c183397-e5bd-4370-b5f1-ed786dfcc211) and click *Submit*. The disease report form may also be printed and faxed to 610-344-5405. If necessary, the disease report may be done via telephone by calling 610-344-6452 during 8:00am-4:30pm Monday-Friday. Questions about submitting the report form should be emailed to cdesk@chesco.org.

# **Investigation of COVID-19 Reports**

The Chester County Health Department investigates all suspect or confirmed reports of COVID-19. The results of the investigation aid the Chester County Health Department in providing guidance the individual(s) involved and to the school. A team at the Health Department will be established to specifically support schools.

Investigations are initiated within 24 hours of receipt on week days. The time necessary to complete an investigation varies based upon the uniqueness of the case.

If the investigation involves a confirmed positive test result, the Chester County Health Department will provide the individual the following information verbally and in writing:

* Notification of isolation timeline
* Expectations for isolation
* Information about who and how to report new or worsening symptoms
* Information about COVID-19.

If the investigation does not involve a confirmed positive test result, the Chester County Health Department will provide the individual the appropriate guidance.

At the completion of any investigation, the Chester County Health Department will notify schools if any staff, faculty or student tests positive, are exposed, or become ill and have to self-isolate, provide guidance for communication to those impacted, and address outstanding questions from the school. School districts, or individual schools will provide the Chester County Health Department with a list of contacts, including the school nurse, with contact information for such notifications.

The Chester County Health Department will not notify the general community if staff, faculty or students test positive, are exposed, or become ill and have to self-isolate.

# **Contact Tracing for COVID-19**

COVID-19 investigations include the identification of close contacts during the contagious period. Contact tracing helps manage COVID-19 from spreading in schools and is used to break chains of transmission and to help prevent future surges of cases. Close contacts are those who are within 6 feet distance for ≥15 minutes with the COVID-19 patient.

Close contacts will be contacted by the Chester County Health Department (not the school) to identify those at risk of exposure during the contagious period and provide the following information both verbally and in writing:

* Notification of the individual’s last date of exposure which factors into determining the timeline for quarantine and therefore release from quarantine
* Expectations for quarantine
* Information about who and how to report new or worsening symptoms
* Information about COVID-19

The success of contact tracing is dependent upon schools partnering with the Chester County Health Department on contact tracing and other mitigation actions, such as:

* Reviewing attendance records
* Identifying potential contacts
* Providing the Health Department with contact lists and contact information.

# **Exclusion From and Return to School Requirements**

| **Scenario** | **Exclude From School** | **Return to School After…** |
| --- | --- | --- |
| #1 – No Symptoms | No | Not applicable |
| #2 – COVID-19 Symptoms | Yes  | Individual should be tested for COVID-19; individuals awaiting test results should be excluded from school.* If test result is negative, return to school following readmission criteria illustrated in PA Code, § 27.73. Readmission of excluded children, and staff having contact with children. If no alternative diagnosis is known, return to school 24 hours after symptoms are improved.
* If test result is positive, follow return to school guidance for scenario #3.

If individual is not tested, follow return to school guidance for scenario #3 (assumed positive). |
| #3 – Positive COVID-19 PCR Test with Symptoms | Yes | * 3 days with no fever **and**
* improvement in symptoms **and**
* 10 days since symptoms first appeared
 |
| #4 – Positive COVID-19 PCR Test without Symptoms | Yes | 10 days after the PCR test was collected * If symptoms develop during 10 days, follow return to school guidance for scenario #3.
 |
| #5 – Close Contact with Symptoms | Yes | Individual should be tested for COVID-19; individuals awaiting test results should be excluded from school.* If test result is negative, return to school 14 days after last exposure to the person with COVID-19 and symptoms have resolved.
* If test result is positive, follow return to school guidance for scenario #3.

If individual is not tested, follow return to school guidance for scenario #3 (assumed positive). |
| #6 – Close Contact of COVID-19 without Symptoms | Yes | 14 days after the date of last exposure to the person with COVID-19* If symptoms develop during 14 days, follow return to school guidance for scenario #5.
 |

*Notes*:

* The 10 day period focuses on the time during which an individual is contagious (estimated infection period). This is the focus of individuals with a positive test result. This is also the focus for close contacts because the contact has been exposed and could develop the illness and become contagious. T
* he 14 day period focuses on the time between exposure and development of illness (estimated incubation period). These time frames are based upon currently known information. This is the focus for individuals without a positive test result.