Question and Answer – School District Webinar 8/20/2020

The following is a list of questions and answers submitted during the Tri-County Health Department (TCHD) Schools Webinar held on 8/20/2020. The questions are grouped by category and not in chronological order from the webinar. The recording of the webinar is available here: https://www.tchd.org/851/School-Support

Masks

Q: Does TCHD suggest masks for students 5-10 years of age?

A: TCHD recommends that all students over the age of 2 wear a mask if it can be tolerated. A school and school district can create policies that are stricter than the public health order.

Q: When students are outside do they need to wear their masks?

A: Colorado Department of Public Health & Environment (CDPHE)/Colorado Department of Education (CDE) guidance states that masks do not need to be worn during outdoor recess and exercise activities where appropriate distancing can be maintained. Reference on Page 12: http://www.cde.state.co.us/communications/20200720reopeningguidance

Q: When students are outside, for lunch, how “spaced” do they need to be while eating?

A: Keep students in same cohort together and away from other cohorts. It is recommended keep students six feet apart while eating when feasible. It’s ok to remove mask for eating and drinking.

Q: Can a face shield be worn in place of a mask for those who cannot tolerate or for teachers who need their student to see their lips (foreign language, classes, hard of hearing, etc.)?

A: Face shields are considered to be an added barrier of protection when used with a mask, but there is currently insufficient data to recommend using a face shield as a substitute for a mask. CDPHE/CDE provide additional guidance regarding temporary accommodations in the school setting:

- If needed, face coverings may be temporarily removed or transparent alternatives may temporarily be substituted when learning differences interfere with instruction.
- If necessary, the mask may be removed for instruction for the shortest duration possible.

Source: http://www.cde.state.co.us/communications/20200720reopeningguidance
See also: Options for students who are deaf or hard of hearing under Plexiglass Guidance https://www.cde.state.co.us/planning20-21/safetyprotocols#plexiglass

Q: The American Disability Act (ADA) law states accommodations be made, can that accommodation be not wearing the mask?

A: The Governor’s office provided information regarding the ADA and mask wearing available here: https://docs.google.com/document/d/14DNDIBBr8guROAiywtfplxio24qbexF6xatv2t7bpRU/edit
Q: If we are using desk shields/plexiglass, is it ok for students aged 2-10 to take off masks while in the cohort?

A: TCHD recommends that all students (older than 2 years of age) wear a mask if it can be tolerated. Plexiglass is considered an additional protective barrier, but CDPHE does not recommend it as an alternative to masks/face coverings. Plexiglass can be used, in addition to a mask, but not in place of a mask. 
[https://www.cde.state.co.us/planning20-21/safetyprotocols#plexiglass](https://www.cde.state.co.us/planning20-21/safetyprotocols#plexiglass)

Q: As a school registered nurse, if I am wearing my KN95 and face shield with a possible COVID-19 positive case am I a susceptible staff?

A: KN-95s will not eliminate exposure or the need for quarantine in non-healthcare settings including schools, even if fit testing is place. There are too many unknowns and lack of controls regarding PPE training, daily fit testing, and other transmission reduction protocols in non-medical settings. CDPHE does not consider the use of KN-95 masks as equivalent to use of N95 masks in the health care setting.

Quarantine and Isolation

Q: If we are aware of a student/staff in quarantine do we need to follow up with that student/staff or does the local public health department follow up?

A: TCHD does not follow up on persons placed in quarantine by public health after initial instructions are provided (https://covid19.colorado.gov/how-to-quarantine#). Individuals in quarantine should monitor for fever and COVID-19 symptoms each day. If symptoms develop, then consult with your health care provider and consider testing. It is up to schools if they want to follow up on students or staff in quarantine.

Q: If a student/staff tests positive for COVID-19 and lives outside TCHD’s jurisdiction, are their tests still reported to TCHD if they attend school in TCHD’s jurisdiction?

A: A student/staff with a positive COVID-19 test will be reported to the health department based on their primary address. TCHD might or might not be informed by another health department of a positive student or staff living in a county other than Adams, Arapahoe, or Douglas. TCHD encourages any student or staff to report their positive result to the school.

Q: Why does wearing a mask not make a difference in exposure and the need to quarantine?

A: Masks reduce the likelihood of spreading disease across the school campus. Masks and physical distancing are important steps to protect others. However, the use of a mask does not completely eliminate the risk of spread from an individual infected person to a close contact, so close contacts of people with COVID-19 still must quarantine for 14 days.

Q: Can a negative test release a student/staff from quarantine?

A: No, the 14-day quarantine period is based on the incubation period of COVID-19. Getting tested during quarantine helps identify if an infection occurred even if symptoms have not yet developed. However, a negative test does not mean the individual will not develop COVID-19 later on during the quarantine period.

Student and Staff Testing

Q: I saw that other school districts have testing sites to go to, is there a resource for local private schools as well?

A: Testing sites can be found on our testing site webpage. If you are interested in having testing onsite please reach out to COVIDSchools@tchd.org and we can connect your school with a community testing site.
Connecting with TCHD

Q: What is the time frame for the after-hours phone line?

A: TCHD after-hours phone line is available to school districts for urgent questions that cannot wait until the next business day. Our normal business hours are Monday-Friday, 8:00 am to 5:00 pm. For calls received by our school task force during regular business hours, TCHD staff will be in touch the same business day if received before 3:30 p.m. If it is after 3:30 p.m., you will receive a response the next business day. For information on how best to reach TCHD: https://www.tchd.org/DocumentCenter/View/7535/COVID-19-School-Investigations-PHIMT-Approved?bidId=

Q: Do you know if other schools have a COVID-19 coordinator?

A: Schools and districts have developed a variety of approaches such as COVID-19 response teams or a COVID-19 point person depending on the size of the school or district. TCHD strongly encourages schools and school districts identify specific staff that are dedicated to managing COVID-19 issues as this work can be very time consuming.

Q: If a staff member becomes symptomatic or test positive for COVID-19, should they contact TCHD directly, go through the school’s Human Resources, or through the school nurse?

A: Any staff with a positive COVID-19 test should be instructed to not come into school, and follow their school procedure to call in their absence and stay at home. Any staff (or student) that tests positive are reported to the health department where they reside through a CDPHE reporting system and will go through a case investigation process by the health department to identify who they may have been in close contact with while infectious. The health department will also provide isolation instructions. If a staff member becomes symptomatic during the school day, immediately isolate the staff member and make arrangements to send home. https://drive.google.com/file/d/1Bj2B19DTu4X8YQnkLAUx2ji0eG8QmM49/view

Q: When would a school become aware of a student or staff testing positive for COVID-19 before TCHD?

A: It is possible that a parent or staff member reports a positive test to the school before TCHD has received the report through CDPHE and/or begins an investigation.

Communication

Q: Would it be a good idea to send the cases and outbreak in child care and school guidance to parents so they know what the school is working off of?

A: CDPHE has this guidance on their website that the public can view. Your school can link these resources on your school website if parents desire additional information.

Child/Staff Feels/Appears Unwell after Arriving at School

Q: Families are reporting allergies that mimic COVID-19 symptoms, can the school accept families telling us that they are sure it’s allergies or must we follow the flow sheet?

A: Follow the CDPHE guidance for assessing any symptom that could be COVID-19. A parent or staff member can seek medical care to evaluate the cause of their symptoms and if there is an alternate diagnosis. According to CDPHE guidance, if these symptoms are not new or worsening of their chronic condition and not accompanied by a new Major or Minor symptom the school would follow routine illness care, the student would return to class if appropriate. Alert the teacher to monitor the student with heightened awareness and record the visit in the usual manor.
Q: Are schools able to assess a combination of symptoms rather than act on just one, for example congestion?

A: Follow CDPHE guidance Child/Staff Feels/Appears Unwell after Arriving at School https://drive.google.com/file/d/1u5i6AuKKh1rUx_xqb-TGV7O69l3BKWAB/view.

Q: Children’s symptoms are reported to be somewhat different, more gastrointestinal. Should this be in the recommendations?

A: TCHD follows CDPHE guidance for evaluating COVID-19 like symptoms; Major symptoms include feeling feverish, having chills, temperature of 100.4 or greater, loss of taste or smell, new or unexplained persistent cough, shortness of breath or difficult breathing. Minor symptoms include sore throat, runny nose or congestion, muscle or body aches, headache, fatigue, nausea, vomiting, diarrhea.

Q: How would sending students home due to a suspected COVID-19 affect the home situation? Do parents and siblings need to isolate?

A: If a student is exposed to COVID-19 in the school setting, they need to be quarantined at home and monitored for fever and symptoms for 14 days. If symptoms develop, then they should consult with a health care provider and consider testing. An exposed person who has not yet developed symptoms has the option of getting tested (about 7 days after quarantine began). A positive test means the exposed person got infected and other family members might then have been exposed (whether the exposed person has symptoms or not). However, a negative test does not mean the individual will not develop COVID-19 later on during the quarantine period. If an exposed person develops symptoms that could be due to COVID-19 and does not get tested, the illness could still be due to COVID-19 and other household members could be exposed.

Student or Staff is out of School because of a COVID-19 Test, Symptoms or Exposure, what to do with their class, cohort and close contacts

Q: Does the classroom include the teacher?

A: Yes, the cohort includes the teacher in most circumstances.

Q: What if the principle tests positive? How would contact tracing come into play?

A: Any staff (or student) that tests positive will go through a case investigation process by the health department where they reside to identify who they may have been in close contact with while infectious. The health department will also provide isolation instructions. The school will need to work with the health department to conduct contact tracing for exposures at the school and manage those exposures accordingly.

Q: In a situation where cohorting is attempted, but there is some limited cross over between cohorts, if there is a positive COVID-19 student/staff in one cohort, do all other cohorts involved still need to quarantine?

A: Each exposure to COVID-19 is assessed on a case-by-case basis. If an infected person exposed different cohorts, then each cohort needs to be placed in quarantine.

Return to School/Work Guidance Following a Positive Symptom Screen for COVID-19

Q: What if a patient see’s their doctor and the doctor declines/refuses recommend testing and their alternative diagnosis is “not COVID-19” or “can return after 24 hours fever free“?

A: Follow CDPHE guidance (https://drive.google.com/file/d/1gQLqxzsJH1tBbmHwoTyalGr48XrZ0Deb/view).
Q: What is the definition of a probable case?

A: According to the national public health case definition, for public health purposes, a probable case is someone who was in close contact with a COVID-19 case and has compatible symptoms.

Q: Any guidance on our students coming to school with severe respiratory disease such as requiring trach, vent, cough assist and parents are wanting them at school even though they are at increased risk if exposed. Would it be recommended that their health care provider approves for in school learning?

A: Consult with the student’s health care provider regarding the best options for school learning.

Q: Please provide guidance for school nurses in regards to cohorts as nurses go to multiple schools a day. Should we try to limit one school a week for example?

A: Discuss options with your school or district administrators. If a school nurse is diagnosed with COVID-19, it is possible that exposure could occur in multiple school settings.

Q: Shared spaces like prayer spaces used from multiple cohorts, any guidance thanks.

A: Multiple cohorts can use a single space, but at separate times (such as rotating through a chapel, gym, or cafeteria). The space should be regularly cleaned and disinfected (frequently touched areas and surfaces) between cohorts. [https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html](https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html)

If a shared space is being used by more than one cohort at the same time, then the entire combined population may need to be quarantined if a positive case is identified that is associated use of that shared space. Use mitigation strategies to reduce risk of exposure (physical distance, masks, assigned seating, flow of persons in and around the space).