Slides from NH DHHS webinar for school nurses on Friday, July 24th, 2020

The following people from NH DPH presented.

Benjamin Chan, MD, MPH - NH State Epidemiologist

Elizabeth A. Talbot, MD – Deputy State Epidemiologist

Elizabeth R. Daly, MPH - Chief, Bureau of Infectious Disease Control

Lindsay J. Pierce, M.Ed. Chief, Infectious Disease Prevention, Investigation & Care Services Section

**Topic: Screening and Exclusion (1)**

Can you please provide questions for the screenings so that it is the same across the state?

Will there be any PSA’s for parents to keep home ANY ill student? Not sending ill students to school?

Are symptoms and temperature screening of students to be recorded in student records?

How are we supposed to screen students and staff when we have over 500?

Not clear why staff need to be screened at building, but relying on parents to screen students?

If we have parents checking temps at home do we only recheck if they show up with symptoms or do you recommend that everyone be tested again when arriving at school?

Temperature and questioning is recommended for the parent to do prior to coming to school or getting on the bus. How will we get this information daily?

Is there a digital means or an app possible that parents could enter the information to be retrieved by the school nurse?

Are there any studies on mass temp taking, reliability of non-touch thermometers?
Topic: Screening and Exclusion (2)

- Since the symptoms are so varied/broad can you provide guidance for school nurses for when a student should be sent home? How many symptoms does a person have to present with to be "sent home"? If a student has a runny nose are they to be sent home?

- Are we to differentiate for a person's "normal" daily symptoms, i.e. seasonal allergies vs. possible COVID symptoms?

- Who will set the guidelines for when a student can return to school who show any type of symptoms? Do they require a negative test if they want to come back before the 10/3 day time period that is recommended by the CDC?

- Could you please confirm my understanding of the following: If a student is sick with ANY of the symptoms of COVID-19, they should be tested, and remain out of school (and isolated) until the test results come back. If they are positive, they go by the 10/3 rule to come back to school/out of isolation (now the 10/1 rule). If it’s negative, we could let them come back as long as they follow our regular exclusion of ill students/staff policy? (i.e., fever free for 24 hours, no vomiting/diarrhea, etc).

Topic: Screening and Exclusion (3)

- If a student is sent home, evaluated by their HCP, and determined to not have COVID-19, can they return to school even with their mild runny nose?

- Will proof be required before reentering school that they’ve been tested and are negative?

- If improved sx, but not completely resolved, they are ok if still continuing to cough as long as improved?

- The logistics of tracking all kids sent home, when they come back, and keeping them out will need much more effort than we can do alone as school nurses.

- If I dismiss a student home with symptoms of COVID, do I need to dismiss siblings of that student if the sibling is symptom-free? Or just after a positive test is reported? Is that classroom closed immediately? Or after a positive test is reported?

- Do we need to notify admin with student’s names who presented with COVID symptoms daily? Is so, how does this affect confidentiality?
Topic: Testing

- Should students and staff be tested for COVID prior to school reentry? And then follow up with daily screenings?
- Will there be testing readily available for kids and staff that have suspected symptoms?
- Accessible and rapid testing will be key if children are not to miss school unnecessarily. What will be our statewide system? Will NH have enough tests to administer? What is the current turnaround time for testing?
- Are primary care providers being prepared for this mass influx of students for testing?
- Our local pediatricians aren’t automatically testing people for COVID. They are saying to stay home and then go to the ED if respiratory issues. Is that going to change?
- After testing, should there be a second test? I’ve seen the first test come back negative and 3-5 days later, test positive.
- I’ve read that up to 30% of tests give false negatives. Is this still the case? If so, even if the child tests, they might be positive and receive a negative result. What about false positives?
- Is research still showing that tests will only test positive while virus is shedding?
- Is the state looking at pooled testing for buildings and will there be municipal sewage testing to monitor for outbreaks?
**Topic: Isolation and Quarantine**

- Can we keep several students in one isolation room sitting six feet apart with a divider of some sort? Are curtains (plastic or cloth) adequate for separation?
- What about keeping window open to ventilate when in isolation?
- Who needs to quarantine if exposed? School nurses? Other staff and students in classrooms and hallways? For students in pre-K, special Ed and kindergarten, they will be moving around the room and not sitting in an assigned seat for the whole time at school. Would you recommend keeping the whole class home for quarantine if there is a student who is positive?
- Subs will be traveling throughout a variety of districts – will they need to quarantine for two weeks after each school they sub for?
- Is there an exception for private car travel for parents who are staff transporting child to college out of NE do they have to isolate for 14 days?

**Topic: Public Health Contact Tracing**

- Will NH DHHS notify the schools in the district if a child under 18 tests positive?
- Who is going to be responsible for contact tracing?
- Is there extra staff on public health to handle the increased call: and investigations from schools?
- Do you have a surveillance plan for schools this fall?
**Topic: School Closure**

- We have low-to-no community transmission in our town & surrounding towns. What should our threshold be for closing school in response to community transmission? [Working at a small, independent school (K-8). We are planning for 6’ desk spacing, masks for all]

**Topic: Transmission, Air Filtration Systems, Medical Treatments, Other**

- Your thoughts on the large recently published South Korea study finding that children 10 and older can spread the virus at least as well as adults? What implications does this have with partial to full reopening of schools and the current relatively low NH infection, hospitalization, and death rates?
- Should we not be doing nebulizer treatments for asthma? Nebulizers & inhalers without a chamber cannot be administered in school?
- Any suggestions on placing portable HEPA filters in the health office and any classroom where there is low air flow/circulation?
- Should districts review HVAC systems (both for cooling in the early fall and heating in the winter) to determine if air circulation will spread droplets?
- Can fans be used to exhaust outside?
- Our schools do not have AC. The 5th floor is unbearably hot in September, without masks. No fans?
- What about kids who vape? Does this increase spread of the virus?
Topic: Personal Protective Equipment (PPE)

- Where are we getting PPE? Will we have enough to open? Will there be a stable supply chain for NH needs? Is funding available for PPE?
- Please define "surgical masks". Most masks available for purchase stated that they are "non medical". Are these adequate for staff/students?
- Should nurses be wearing N95 when assessing symptomatic students while in isolation room?
- Fit testing for N95? In the hospital setting nurses need to be fit tested to make sure N95 masks fit properly. Is that going to be provided for a school nurses? How often do we change the masks between symptomatic kids?
- What is the increased risk for a classroom if a teacher were to use a face shield while physically distanced with all students masked vs. all being masked? In this scenario, if the teacher came within 6 feet of a student (i.e., to help them with a math problem) they would put on a mask. If this is not idea/acceptable, have you seen any efficacy studies on the masks that have a clear “window” in the mouth area?
- What is the proper guidance for staff who are pregnant. PPE-wise?