Considerations for School Nurses Regarding Care of Students and Staff that Become Ill at School or Arrive Sick

This document is NOT a substitute for nursing judgment and does not dictate an exclusive course of action. State and district laws and policies should be followed.

School nurses are essential healthcare providers in the community working on the frontlines of the COVID-19 pandemic in schools. For schools currently operating as well as planning for schools to re-open, there are key activities that the school nurse should be focused on related to COVID-19.

CDC Provides Guidance on an isolation plan if someone arrives or becomes ill at school. The definition of **Isolation** "separates sick people with a contagious disease from people who are not sick" (CDC, 2017).

The school plan should include the following:

- Follow isolation guidance for schools:
    - o Evaluate the current school nurse designated space and determine if there is an adjacent space for isolation.
    - o If an adjacent space is not available, consider moving the school nurse work area to another larger location with a separate adjacent space. Consideration of ventilation such as windows and an outside door is preferable to reduce the spread of disease for isolated individuals exiting the building. Computer, phone, internet, and restrooms with handwashing facilities are required in the school nurse designated space.
- The use of facemasks for persons with respiratory symptoms and fever over 100.4 is recommended if available and tolerated by the person and developmentally appropriate.
- Remember that **schools are not expected to screen students or staff to identify cases of COVID-19**. If a school has cases of COVID-19, local health officials will help identify those individuals and will follow up on next steps.
- Work closely with communication staff for the school/school system and local public health to share resources with the school community to help families understand when to keep children home. The resources could include information on COVID, but also should discuss issues such as stress/anxiety, abuse, caring for self, cultural sensitivity/stigma, and community resources that may be needed during this time.
    - o Consider a webpage for families with links to CDC and state health departments, as well as other reputable sources addressing the needs of your population.

- o Send regular updates to families on social media, email and other formats as available to school systems.
- o Coordinate efforts with parent teacher association and other groups.
- o Be actively involved in developing school emergency operation plans. Be sure the plan addresses communicable disease outreach, communication, distance working, etc.
- o Resource: [Guide for Developing High-Quality School Emergency Operations Plans](#).
- Work with your local health department related to outreach activities.
- Coordinate with school administration and families to determine when and how students' school medication supplies can be picked up for use at home.
- Develop a list of resources that families may need during this time such as local food pantries, health centers, etc. Distribute the list to families, as these needs may be new to families and they are unaware of community resources.
- Identify your students most at-risk for the condition as well as if schools close and create a plan to address potential needs.
- Establish procedures to ensure students and staff who become sick at school or arrive at school sick are sent home as soon as possible.
  - o Create a "When to isolate and send students and staff home" flow chart for unlicensed staff and school administrators to follow if the school nurse is not present 100% of the time in the school.
  - o Refer parents of high-risk students to their healthcare providers to determine when school re-entry is recommended.
  - o Send ill staff immediately home with administrative support, and isolate students if caregivers are not present to immediately take them home.
  - o Train unlicensed assistive personal on the administration of the flow chart, proper temperature taking procedure, and the use of Personal Protective Equipment (PPE), including eye protection, gowns, gloves, and facemasks.
  - o N95 masks are recommended for healthcare providers and must be fitted to ensure proper protection. School nurses should work with local public health and or other health organization to meet this requirement.
  - o If N95 masks are not available due to supply issues, other facemasks may be used. See [CDC Strategies for Optimizing PPE](#).
  - o Establish a process for immediate handwashing or the use of hand sanitizers prior to school building entry.
  - o Although hand sanitizer can be used, handwashing is the preferred method if available.
  - o Additional thermometers, PPE, and hand sanitizer may be available from local health departments from state stockpiles.

- o Using a tracking form, track students with symptoms of COVID-19 and report to local public health for follow up.
- Work closely with local public health for procedures for re-entry when schools have been closed for more than 2 weeks.

Additional recommendations have been set forth by CDC once a confirmed case of COVID has been identified in your school. The following references also provides guidance for confirmed cases.

REFERENCES:

Centers for Disease Control and Prevention, (2020). Interim Guidance for Administrators of US K-12 Schools and Childcare Programs. *Plan, Prepare, and Respond to Coronavirus Disease 2019 (COVID-19),* https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html

Centers for Disease Control and Prevention, (2019). Coronavirus Disease 2019. (COVID-19) *Strategies for Optimizing the Supply of PPE*. https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html

Centers for Disease Control and Prevention, (2017). *Quarantine and Isolation.* https://www.cdc.gov/quarantine/