GUIDANCE ON RE-ENTRY TO K-12 SCHOOLS

A CURATED RESOURCE OF TOP RECOMMENDATIONS FOR NURSES IN SCHOOLS:







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In times of uncertainty, Flinn understands that clear communication and easy access to facts and recommendations is key—and we are ready to help.

There is an overwhelming amount of information available on returning to school safely and we know your time is limited.

The education and safety professionals at Flinn have created this guide curating the key pieces of information designed to help as you plan for what lies ahead in the educational calendar.

Pulling from the guidelines provided by the <u>Centers</u> for Disease Control and Prevention (CDC), World Health Organization (WHO), <u>National</u> Association of School Nurse Consultants, (NASN) <u>North American Center for Threat</u> Assessment and Trauma Response (NACTATR)^{*} and more, we have organized this document into four sections that reflect the categories outlined by top physical and mental health organizations.

Section One: Potential Role of the School Nurse in a COVID-19 Environment

Section Two: Maintaining a Physically and Mentally Healthy School Environment

There is no one universal formula for opening schools safely and maintaining a safe environment. We recommend using this guide as a starting place to find the information you need, clicking through on the links to read more, and deferring to your local DOE regulations (also linked in this document).

*These materials contain content provided by third parties and are being distributed for your convenience only. We make no representations about the accuracy of these materials and urge you to consult federal, state, and local public health guidelines for the most up-to-date information on reopening.

SECTION 1

POTENTIAL ROLE OF THE SCHOOL NURSE IN K-12 ENVIRONMENT

CONTRIBUTIONS FROM THE SCHOOL NURSE IN RESPONSE TO COVID-19 WITHIN SCHOOLS







Traditional Role of the School Nurse

School nurses have had a long positive history of being a part of the school community and in being proactive members of the school leadership. This role has never been more important for the entire school population.

School nurses have been involved with the on-going monitoring of student health and wellness in their schools and now have an increased role as a result of the COVID-19 pandemic. As a result of the coronavirus, the role of the school nurse will most likely have in increased role and responsibility in the school community.

The school nurses have been invaluable resources in providing routine checks on their students in mainstream and in special education classes in addition to the innovative health education that they provide to the students.

^{1. &}lt;u>https://www.nasn.org/nasn/nasn-resources/publications/nasn-school-nurse</u>



When is the 'right time' to re-open schools?

There will not be a universal formula that can be used to determine the best day to start re-opening physical schools, however, there are considerations for education leadership to factor into their re-opening of school timelines and procedures.

The CDC offers a <u>decision tree</u> designed to assist administrators in making (re)opening decisions regarding K-12 schools during the COVID-19 pandemic.¹

Schools can determine, in collaboration with <u>state and local</u> <u>health officials</u> to the extent possible, whether and how to implement these considerations while adjusting to meet the unique needs and circumstances of the local community. Implementation should be guided by what is feasible, practical, acceptable, and tailored to the needs of each community.²

^{1.} CDC Schools During the COVID-19 Pandemic

^{2.} CDC Considerations for Schools

Background on Coronavirus Transmission

The virus that causes COVID-19 is thought to spread mainly from person to person, mainly through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. Spread is more likely when people are in close contact with one another (within about 6 feet).¹ Therefore, personal prevention practices—such as <u>handwashing</u> and <u>staying home when sick</u>— and <u>environmental cleaning and</u> <u>disinfection</u> are important principles that are covered in this document.

Fortunately, there are a number of actions school administrators can take to help lower the risk of COVID-19 exposure and spread during school sessions and activities. **Communication and** education are central to these actions!

1. <u>CDC: How Covid-19 Spreads</u>





Behaviors that Reduce the Spread of Covid-19:

Actively encourage employees and students who are sick or who have recently had close contact with a person with COVID-19 to stay home. Develop policies that encourage sick employees and students to stay at home without fear of reprisal, and ensure employees, students, and students' families are aware of these policies. Consider not having perfect attendance awards, not assessing schools based on absenteeism, and offering virtual learning and telework options, if feasible.¹

Educate staff and families about the <u>symptoms of</u> <u>Coronavirus, what to do if they are sick</u>, and implement <u>stay home</u> measures for sick students and staff.

1. CDC: Public Health Guidance for Community-Related Exposure



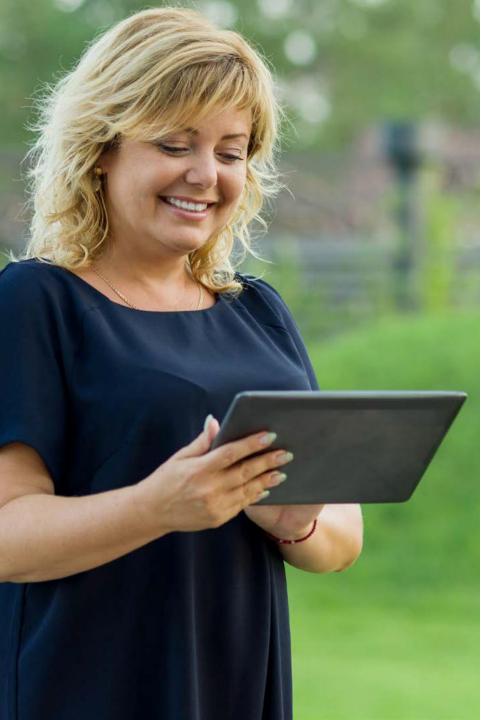
Behaviors that Reduce the Spread of Covid-19: When to Return to Work

When you can be around others (end home isolation) depends on different factors for different situations. It is important to remember that anyone who has close contact with someone with COVID-19 should stay home for 14 days after exposure based on the time it takes to develop illness.¹

Here are some links to share with staff and students:

- If they have been sick with COVID-19
- If they have recently had close contact with a person with COVID-19

^{1.} CDC: When You Can be Around Others After You Had or Likely Had COVID-19



Designated COVID-19 Point of Contact

Designate a staff person to be responsible for responding to COVID-19 concerns (*e.g., school nurse*). All school staff and families should know who this person is and how to contact them.¹

This person will have a larger role in the management of fears and concerns to the students and families as well as the educators in the school.

If the school nurse is a dedicated point of contact for the school, make sure that all communications **adhere to the school district communication policy direction on COVID-19 and other protocols.**

Templates do exist at the NASN.ORG and online for messaging to close contacts, school leadership etc.

^{1.} CDC Considerations for Schools

^{2.} https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19



Guidance from the NASN on School Nurses

There is an overwhelming amount of literature and guidance that exists about the 'best path forward' for safe school re-entry planning and the considerations involved with these decisions. There are multiple factors that need to be considered, and with the CDC, WHO, NASN, the State DOE and local state health authority guidance, and there is no shortage of information. 1

Looking at the <u>interim guidance</u> published by The National Association of the School Nurses (NASN.org) on the role that school nurses should play in the back-to-school planning, they have identified five key areas that school nurses can participate in school safety and compliance of reopening schools.

Each of these areas will contribute to the overall success of having students and staff back in the school buildings and maintaining school health and safety protocols. 2

^{1.} CDC Considerations for Schools

^{2.} https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19



Essential Member of School Planning and Readiness Team

The school nurse is an essential member on pandemic preparedness, re-opening and re-entry planning teams. School nurses are active on the front lines of risk and for exposure to students who are sick or who are asymptomatic.

As a health and prevention professional, school nurses are recognized as specialists in public health as well as infectious controls. The school nurse leads healthcare programs and individualized care in the schools and practices in a non-biased format which provides individualized care to a multitude of students. Current standards of practice are evolving specific to the standards of care for students during the COVID-19 pandemic and are threaded throughout this guidance document.

School nurse leaders should be included in state and local level planning for schools opening and be involved with the communications from the site-based schools they are in.

^{1.} CDC Considerations for Schools

https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19

^{3.} https://www.flinnsci.com/ppe/school-and-science-labs/



Directive 1: Informing School Leadership about Health Considerations on Re-Opening

The School Nurse needs to be actively involved with the following considerations from a school planning and contingency perspective:

Ensure that the School is well stocked with necessary **PPE and sanitation/prevention products** including nitrile gloves, protective eyewear (goggles/glasses/face shields) and disposable isolation gowns or lab coats.

Additionally they should be providing products for the Heath Checks (if applicable) and in collaboration wit the CDC Considerations for Schools.

Within the schools, there is direction for an area for isolating students or staff in a designated area which can be used to diagnose and assess people with possible COVID-19 symptoms. Ideally, this area will provide privacy and access to a sink for hand hygiene protocols. If there is not a sink in the designated area, the use of a portable hand-washing station is a good idea for school nurses.

Schools will be adhering to the policies and procedures for sending students and staff home if they exhibit COVID-19 symptoms and for making sure it's safe for them to return to school once they're symptom-free. If the school nurse is the 'designated point of contact', they will play a larger role in the school communication and messaging in these events as required.

- 1. CDC Considerations for Schools
- https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19
- 3. https://www.flinnsci.com/ppe/school-and-science-labs/



Directive 2: Maintaining Safe & Healthy Environments in Schools

The school nurse will be an active member of the school community and will be involved with the protocols in place for the following potential protocols in school:

- 1. Increased hand hygiene protocols for schools including entrance and school-time designated times for hand washing and sanitizing.
- 2. The development of the screening protocols in place in the school and the methods that these 'health checks' are performed. These will apply to students, staff, visitors and support workers in the school.
- 3. The designation of isolation rooms for students and staff who appear to the symptomatic of COVID-19 for full assessment and documentation protocols. This will also involve the creation of protocols on evaluation and assessment as well as communication frameworks for anyone involved with this aspect.

^{1.} CDC Considerations for Schools

https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19

^{3. &}quot;Care of Students and Staff that Become III at School or Arrive Sick"



Directive 3: Coordination of Public Health and Community Health Programs

The school nurse will be engaged with the DOE and local Health Department/Authority directives and guidance and will make evidence-based decisions specific to their schools from the most current information available.

- A. Design and communicate effective messaging surrounding the education in the community regarding proper hygiene behaviors (hand washing, masks, social distancing, sanitizer etc.)
- B. The development of an anti-bias and stigma campaign that prevents bullying and stereotyping across different demographics in the community.
- C. The development of a community outreach program aimed at assisting families who may be encountering economic instability as a result of COVID-19 and the communication of various local programs that can assist these families in need.

 <u>Reduce Stigma Related to Coronavirus Disease 2019</u>"
 https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19



Directive 4: On-site care of students, staff, and support workers in schools

In addition to the health and symptomatic observations for COVID-19, the school nurse should also be involved with the following aspects of a safe school re-opening and continuity perspective:

- A. Plan for the use of respiratory care enhanced protocols including nebulizers, air passage suctioning and the use of aerosols for persons in distress.
- B. The Socio-Emotional-Traumatic response assessments for all people in the school building. There will be lots of economic, cultural, personal and natural anxiety surrounding COVID-19 and the impacts these have had on families in the schools. Providing distress hotlines will be essential for some.
- C. To identify any unmet medical, health, prevention or nutritional issues with the students, staff, support workers in the school and to make remedial plans to quickly resolve these concerns.
- 1. <u>https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19</u>
- 2. K-6 Emotional Management
- 3. NACTATR Managing the Social-Emotional and Traumatic Impact

Directive 5: Collection and Collaboration of key data metrics in schools with others

Ideally the school nurse will be involved with the capture and documentation of key data that should be shared among the school district, neighboring communities, and the state/regional health agencies to help in making datadriven decisions for their schools.

This will include any observations and data directly associated with the isolation room criteria and from a community-sharing environment, this will serve to assist those in helping to formulate plans and extrapolating for schools trendlines and analysis of the data. The school nurses in a district must be able to collaborate with their colleagues and make decisions reflecting current data.

These data points will all serve to outline the changes in the regions and the overall community based on school-driven results.



^{1.} https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19



What other factors need to be considered when making school re-opening plans?

There are many factors that must be included in the safe school reentry planning that here are some that the school nurse will be involved with in order to facilitate the return of students and teachers into the schools:

- 1. Instructional Models will determine the number of students in the building at one time and the layout of the classroom etc.
- 2. Direction on the use of PPE (face masks, face shields, nitrile gloves, IR thermometers, signage, hand sanitizers, partitions/guarding, and other suggested items) from a local health authority or State DOE based on facts and data from that area.
- 3. Impacts of keeping schools closed balanced with the social, emotional, academic and physical issues that exist with students and staff.

1. Flinn Professional Learning Series Summer 2020

2. https://www.flinnsci.com/ppe/school-and-science-labs/



Maintaining Healthy Operations

Schools may consider implementing several strategies to maintain healthy operations In this section, we have gathered information from several resources to assist in your decision-making processes.

Schools can determine, in collaboration with <u>state and local</u> <u>health officials</u> to the extent possible, whether and how to implement these considerations while adjusting to meet the unique needs and circumstances of the local community.

Implementation should be guided by what is feasible, practical, acceptable, and tailored to the needs of each community.¹

1. CDC Considerations for Schools



Protections for Staff and Children at Higher Risk for Severe Illness from COVID-19

Offer options for <u>staff at higher risk</u> for severe illness (including older adults and people of all ages with certain underlying medical conditions) that limit their exposure risk (e.g., telework, modified job responsibilities that limit exposure risk).

Offer options for <u>students at higher risk</u> of severe illness that limit their exposure risk (e.g., virtual learning opportunities). *The school nurse may be involved with these assessments from a local perspective*.

Consistent with applicable law, put in place policies to protect the privacy of <u>people at higher risk</u> for severe illness regarding underlying medical conditions.¹

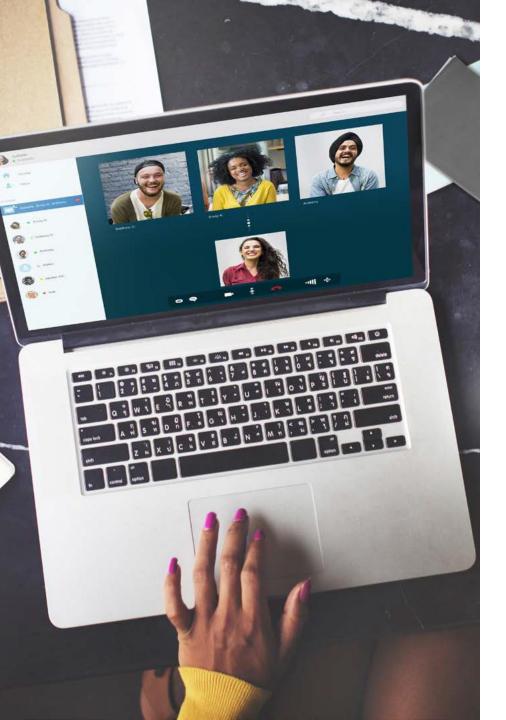
1. CDC Considerations for Schools



Regulatory Awareness

Be aware of local or state regulatory agency policies related to group gatherings to determine if events can be held.¹

Ensure that State DOE and local school district policies are adhered to for compliance on the allowed number of people in an area including classrooms. This will be determined in tandem with the local health authority and the federal guidance on gatherings. You will still need to follow social and physical distancing protocols to minimize the spread of the disease.



Staff Training

Train staff on all safety protocols. This will involve many facets of the school environment including increased cleaning and disinfection practices. The school nurse can provide training on the symptoms to observe in staff and students in the school and will ensure that:

Conduct training virtually or ensure that social distancing is maintained during training.¹

The State health authorities will establish many of these policies for use in schools.

Training will be centered around increased health and safety practices for educators and students in an effort to minimize the spread of Covid-19 and other illnesses.

^{1.} CDC Considerations for Schools



Recognize Signs and Symptoms

If feasible, conduct daily health checks (e.g., temperature screening and/or or <u>symptom checking</u>) of staff and students if this is deemed necessary in the local school district policy and community COVID-19 transmission data in the jurisdiction.

School nurses can assist in setting up these health checks and isolation rooms for students/staff who are unwell at school and have input into the type of on-site health and wellness checks in place in accordance with state health agency and DOE protocols.

Health checks should be conducted safely and respectfully, and in accordance with any applicable privacy laws and regulations. School administrators may use examples of screening methods in CDC's supplemental <u>Guidance for</u> <u>Child Care Programs that Remain Open as a guide for screening children and CDC's General Business FAQs</u> <u>for screening staff.</u>¹

^{1.} CDC Considerations for Schools

^{2. &}lt;u>https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19</u>



Support Coping and Resilience

Encourage employees and students to take breaks from watching, reading, or listening to news stories about COVID-19, including social media if they are feeling overwhelmed or distressed.

Promote employees and students eating healthy, exercising, getting sleep, and finding time to unwind.

Encourage employees and students to talk with people they trust about their concerns and how they are feeling.

Consider posting signages for the national distress hotline: 1-800-985-5990, or text TalkWithUs to 66746.¹

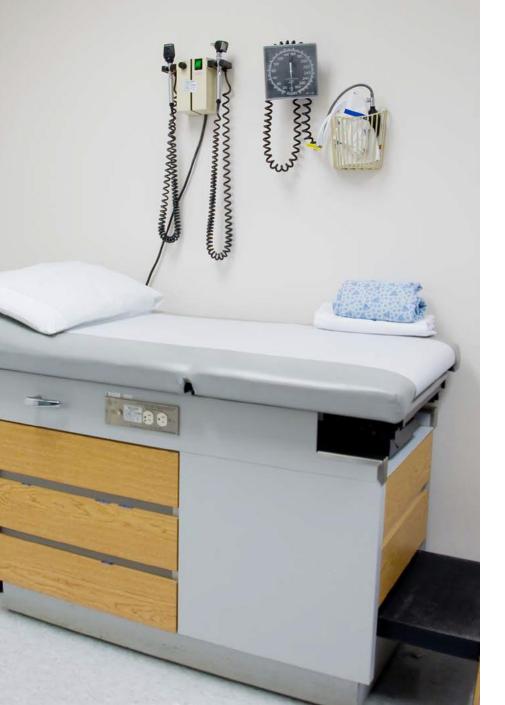
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SECTION 2

MAINTAINING A PHYSICALLY AND MENTALLY HEALTHY SCHOOL ENVIRONMENT







Preparing for When Someone Gets Sick

Schools may consider implementing several strategies to prepare for when someone gets sick. It is inevitable that people will become sick at school or after being at school. The school nurse will have an integral role in this on-going evaluation and assessment for the school.

These protocols are here to help guide your decision-making processes.¹

Advise Staff and Families of Sick Students of Home Isolation Criteria

- Isolate and Transport Those that are Sick
- Clean and Disinfect Areas
- Notify Health Officials and Close Contacts

^{1. &}lt;u>CDC Considerations for Schools</u>



Advise Staff and Families of Sick Students of Home Isolation Criteria

Sick staff members or students should not return to school until they have met CDC's criteria to discontinue home isolation.¹

Follow the guidance and direction from the local school district policy on communication for COVID-19 and ensure that all messaging is in keeping within these protocols.

This is to be communicated BEFORE people arrive at the school location and potentially contaminate others.

If the school nurse is the dedicated point of contact, they can use some of the template messages that exist surrounding communications about school-based potential COVID-19 cases and ensure that this is in adherence with the local policy on messaging and privacy.

^{1. &}lt;u>CDC Considerations for Schools</u>



Isolate and Transport Those Who are Sick

Make sure that staff and families know that they (staff) or their children (families) should not come to school, and that they should notify school officials (e.g., the designated COVID-19 point of contact) if they (staff) or their child (families) become sick with COVID-19 <u>symptoms</u>, test positive for COVID-19, or have been <u>exposed</u> to someone with COVID-19 symptoms or a confirmed or suspected case.

Immediately separate staff and <u>children</u> with COVID-19 <u>symptoms</u> (such as fever, cough, or shortness of breath) at school. Individuals who are sick should go home or to a healthcare facility depending on how severe their symptoms are, and follow <u>CDC guidance for caring for oneself and others</u> <u>who are sick</u>.¹

^{1. &}lt;u>CDC Considerations for Schools</u>



Isolate and Transport Those Who are Sick

Work with school administrators, nurses, and other healthcare providers to identify an isolation room or area to separate anyone who has COVID-19 symptoms or tests positive but does not have symptoms. School nurses and other healthcare providers should use <u>Standard and</u> <u>Transmission-Based Precautions</u> when caring for sick people. See: <u>What Healthcare Personnel Should Know About Caring</u> for Patients with Confirmed or Possible COVID-19 Infection.

Establish procedures for safely transporting anyone who is sick to their home or to a healthcare facility. If you are calling an ambulance or bringing someone to the hospital, try to call first to alert them that the person may have COVID-19.¹

1. <u>CDC Considerations for Schools</u>



Clean and Disinfect

Close off areas used by a sick person and do not use these areas until after cleaning and disinfecting.

The school nurse will conduct a formal assessment on the individual(s) who are symptomatic and make a determination that will potentially result in the following:

Close the classroom where the individual was in class:

Wait at least 24 hours before entering the classroom to start the <u>cleaning and disinfecting</u>.

If 24 hours is not feasible, wait as long as possible. Ensure <u>safe and correct use</u> and storage of <u>cleaning and disinfection</u> <u>products</u>, including storing products securely away from children.¹

^{1.} CDC Considerations for Schools



Notify Health Officials and Close Contacts

In accordance with state and local laws and regulations, school administrators should notify <u>local health officials</u>, staff, and families immediately of any case of COVID-19 while maintaining confidentiality in accordance with the <u>Americans with Disabilities Act</u> (ADA).

If the school nurse is the Designated Point of Contact, they should inform those who have had <u>close contact</u> with a person diagnosed with COVID-19 to stay home and <u>self-monitor for</u> <u>symptoms</u>, and follow <u>CDC guidance</u> if symptoms develop.¹



Managing the Social-Emotional and Traumatic Impact

The COVID 19 pandemic has required our educational system to pivot quickly and effectively in a relatively short period of time. While the tendency is to seek "best practice" solutions to school re-entry, reality tells us that each of our schools will require a unique response to reentry mostly because we are planning this response while still "being in it".¹

The WHO, NACTATR, NASN and other leading agencies have been working to design and develop a school age guidance document on how to discuss the COVID- 19 in schools that provides the adequate amount of information that can be easily understood by the student learners at each grade and age level.

^{1.} NACTATR: Guidelines for Re-Entry into the School Setting During the Pandemic

^{2. &}lt;u>https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19</u>



Tips for talking to Children about COVID-19

Remain calm. Remember that children will react to both what you say and how you say it. They will pick up cues from the conversations you have with them and with others.

<u>Reassure children</u> that they are safe. Let them know it is okay if they feel upset. Share with them how you deal with your own stress so that they can learn how to cope from you.

Make yourself available to listen and to talk. Let children know they can come to you when they have questions.

Avoid language that might blame others and lead to stigma.

Pay attention to what children see or hear on television, radio, or online. Consider reducing the amount of screen time focused on COVID-19. Too much information on one topic can lead to anxiety.¹

^{1. &}lt;u>CDC: Tips for talking to Children</u>



Tips for talking to Children about COVID-19

Provide information that is truthful and appropriate for the age and developmental level of the child. Talk to children about how some stories on COVID-19 on the Internet and social media may be based on rumors and inaccurate information. Children may misinterpret what they hear and can be frightened about something they do not understand.

Teach children everyday actions to reduce the spread of germs. Remind children to wash their hands frequently and stay away from people who are coughing or sneezing or sick. Also, remind them to cough or sneeze into a tissue or their elbow, then throw the tissue into the trash.

If school is open, discuss any new actions including routines on hygiene and prevention that may be taken at school to help protect children and school staff.²

^{1. &}lt;u>CDC: Tips for talking to Children</u>



Primary School Conversations about COVID-19

Make sure to listen to children's concerns and answer their questions in an age-appropriate manner; don't overwhelm them with too much information. Encourage them to express and communicate their feelings. Discuss the different reactions they may experience and explain that these are normal reactions to an abnormal situation.¹

Emphasize that children can do a lot to keep themselves and others safe:

- Introduce the concept of social distancing (standing further away from friends, avoiding large crowds, not touching people if you don't need to, etc.)
- Focus on good health behaviors, such as covering coughs and sneezes with the elbow and washing hands

^{1.} WHO: Key Messages and Actions for COVID-19



Primary School Conversations about COVID-19

Help children understand the basic concepts of disease prevention and control. Use exercises that demonstrate how germs can spread.

For example, by putting colored water in a spray bottle and spraying over a piece of white paper. Observe how far the droplets travel.

Demonstrate why it is important to wash hands for 20 seconds with soap and water:

 Put a small amount of glitter in students' hands and have them wash them with just water, notice how much glitter remains, then have them wash for 20 seconds with soap and water.¹

^{1.} WHO: Key Messages and Actions for COVID-19



Middle School and High School Conversations about COVID-19

Make sure to listen to students' concerns and answer their questions.

Emphasize that students can do a lot to keep themselves and others safe.

- Introduce the concept of social distancing
- Focus on good health behaviors, such as covering coughs and sneezes with the elbow and washing hands
- Remind students that they can model healthy behaviors for their families

Encourage students to prevent and address stigma

 Discuss the different reactions they may experience and explain these are normal reactions to an abnormal situation. Encourage them to express and communicate their feelings



Middle School and High School Conversations about COVID-19

Build students' agency and have them promote facts about public health.

 Have students make their own Public Service Announcements through school announcements and posters

Incorporate relevant health education into other subjects

- Science can cover the study of viruses, disease transmission and the importance of vaccinations
- Social studies can focus on the history of pandemics and evolution of policies on public health and safety
- Media literacy lessons can empower students to be critical thinkers and makers, effective communicators and active citizens.¹

^{1.} WHO: Key Messages and Actions for COVID-19



Managing the Social-Emotional and Traumatic Impact of COVID-19

Students and staff returning to school do so with a varying range of emotions; fear for some, and the weight of uncertainty for most due to the unseen force of a virus so powerful, we were told to "hide in our homes" to avoid it.

However, unlike most other traumatic experiences where we are supporting schools in the aftermath of a single tragedy, COVID-19 is a protracted world-wide traumatic event. An event that in all likelihood, will still be occurring during re-entry to schools.

Yet, what makes that fact more manageable is that schools are not "traumatic stimuli". Meaning, schools were closed to protect students and staff from harm and not because they were harmed. Whereas, reclaiming a school where a terrible tragedy occurred within its walls is more complex then re-entering a school we have been temporarily disconnected from for our own protection.¹

^{1.} NACTATR Managing the Social-Emotional and Traumatic Impact



Managing the Social-Emotional and Traumatic Impact of COVID-19

At the federal and state level, there will continue to be guidance about how to take action to prevent contagion and to maintain safety of the school/campus and the classroom. But what can we expect when students return to the classroom in regard to their social and emotional well-being? How can the school nurse be proactive in this?

- Will they be ready to learn?
- What percentage of students will be truant or refuse to return to school?
- Are faculty and staff prepared?
- Are parents sufficiently reassured to allow their children to return to school buildings?
- What can we expect from all the constituents and members of the school family and what are the steps we can take to facilitate the best possible outcomes when schools restart?¹

^{1.} NACTATR Managing the Social-Emotional and Traumatic Impact



The Role of State and Federal Government

This is a crisis of enormous proportions and complexity but, due to the disparity of impact, some regions are experiencing social- emotional and traumatic impacts more than others.

This disparity means that under-reaction is also an issue we will need to address as some schools (students, staff and their families) may have pronounced polarization between those who feel the government response to the pandemic was completely unnecessary to those who feel we should not be returning school.

COVID-19 is not only a "School Issue". It is an entire "Community Issue".¹

^{1.} NACTATR Managing the Social-Emotional and Traumatic Impact

Helping Children with Traumatic Separation or Traumatic Grief as Related to COVID-19

The COVID-19 pandemic has resulted in thousands of children being separated from loved ones who require isolation and/ or hospitalization due to a loved one testing positive for COVID-19 or because of potential exposure for essential workers. For some children, the separation may result in distress or in a traumatic reaction. If a loved one dies from the virus, a child may experience traumatic grief due the sudden nature of the death and being unable to say goodbye or observe cultural or religious mourning rituals.

This tip sheet is for caregivers or other adults supporting children with traumatic separation or traumatic grief related to COVID-19.

Especially in stressful times, in addition to the suggestions here, all children benefit from caregivers listening to and validating their different feelings.¹



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I want you to know that:	You can help when you:
 I may have a lot of feelings but am not able to identify them or why I have them. 	Acknowledge it is ok to feel sad, angry, hurt, lonely, etc. Understand when I get upset out of the blue about things that do not seem related. Help me label my feelings with words and talk about what is happening.
 I am afraid when my loved one who is sick must be isolated rom me at home or away from some. 	Explain that isolating my loved one protects me from getting sick and helps the sick person to recover. Tell me the isolated person cares about me very much and does not want me to get sick. Remind me how you or other helpers take care of our sick loved one and me. Help me to find ways to stay in contact with my sick loved one (call, text, make a card).
 I am afraid that my loved one, who is a health worker or mergency responder, will get lick or die. 	Explain that health professionals and emergency responders get special training on how to stay safe at work to care for people. Tell me ways I can stay in touch with my loved one if I can't see them all the time or if they have to stay close to work for a period of time. Explain the important work they are doing to care for people.
4. I am sad that I can't see my sick loved one in the hospital and I worry that they are alone.	Assure me that my loved one wants me to stay safe, so they do not want me near sick people in the hospital. Exclain how people in the hospital make sure my loved one is not alone. Help me communicate with my loved one, through calls, cards, pictures, songs, prayers, texts and virtual communication when possible.
5. I am scared that my sick loved one is in the hospital and might die.	Give me accurate information about how my loved one is doing in words I can understand for my age. Help me understand that most people get better and come home. Tell the truth if my loved one won't recover and help me find a way to say goodbye.
6. I am scared, sad and mad that I can't say goodbye in person if my loved one is going to die in the hospital, and we can't go.	Explain that health care workers are with my loved one, so they are not alone. Find out If you can send a message for me or I can say goodbye remotely.

<u>Helping Children with Traumatic Separation or Trau-</u> matic Grief Related to COVID-19

^{1.} NCSTN: Helping Children With Traumatic Separation Or Traumatic Grief Related To Covid-19

Supporting Children During Coronavirus

With the ever-changing landscape of our lives as you cope with the COVID-19 outbreak, you are trying to determine how best to help your family. Your children/teens may be worrying about the safety of your family, struggling with thoughts and feelings about the stories and images coming from coverage of COVID-19, and the uncertainty of not knowing when they can return to those routines that provided them comfort. Posting of distress hotlines and text numbers will also help provide another platform to expressing their feelings.

They may turn to you or other trusted adults for support, help, and guidance. We hope that this resource will help you think about what you can do to make these times of uncertainty a bit less stressful.¹



Supporting Children During Coronavirus (COVID19)

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Start the conversation

Many people worry that talking to young children will lead to increased worries and anxieties. The opposite is actually the case. Bringing difficult topics into the conversation can help lessen worries in children of all ages. Find a quiet, comfortable place to talk. Take a breath and bring it up. You can say something like this:

• There has been a lot of talk about coronavirus. Tell me what you know about it, or tell me what you've heard about it."

 For tweens and teens, also consider, "Tell me what your friends are saying about coronavirus. What have you seen about this online?"

Starting the conversation allows you to listen to what your child/teen knows and gives you a place to begin as the conversation continues.

Correct Inaccurate Information

If you hear inaccurate information or misunderstandings from your children/teens, take time to provide the correct information in language your child/teen can understand.

Encourage your children to ask questions, and answer those questions directly.

Your children/teens may have some difficult questions about the coronavirus. For example, children may ask if it is possible that someone in the family may get the virus that causes COVID-19. The concern may be an issue for both you and your children/teens alike. This question is speaking to concerns about the safety and security of themselves and those they love. In your answer, stress what is being done in your family, the community, state, country, and the world to reduce risk. Question-and-answer exchanges help ensure ongoing support as your children begin to cope with emotions related to this virus.

This project was funded by the Substance Abuse and Mental Health Services Administration (SAMHS4), US Department of Health and Human Services BHIS). The views, pakeies, and opinioes expressed on those of the authors and do not nocessarily infloct those of SAMHSA is HHS.

Supporting Children During Coronavirus (COVID19)

^{1.} NCSTN: Supporting Children During Coronavirus (COVID19)

Hand Hygiene Requirements

Teach and reinforce handwashing with soap and water for at least 20 seconds and increase monitoring to ensure adherence among students and staff. **Critical across ALL grade levels.**

If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used (for staff and older children who can safely use hand sanitizer). Encourage staff and students to cover coughs and sneezes with a tissue.

Used tissues should be thrown in the trash and hands washed immediately with soap and water for at least 20 seconds.

If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used (for staff and older children who can safely use hand sanitizer).¹

Stop Germs! Wash Your Hands.

When?

- · After using the bathroom
- · Before, during, and after preparing food
- Before eating food
- Before and after caring for someone at home who is sick with vomiting or diarrhea
- After changing diapers or cleaning up a child who has used the toilet
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage

How?

LIFE IS BETTER WI



This material was developed by CDC. The Life is Better with Clean Hands Campaign is made possible by a partnership bet CDC Foundation, GOJO, and Staples. HHS/CDC does not endorse commercial products, services, or companies.





Wet your hands with clean, running water (warm or cold), with the soap. Be sure to lather and apply soap.

vour fingers, and

under your nails

www.cdc.gov/handwashing



from beginning

to end twice.

Rinse hands Well under a clean towe air dry them water.

Keeping hands clean is one of the most important things we can do to stop the spread of germs and stay healthy.

<u>CDC launched Life is Better with Clean Hands, a new</u> <u>national campaign designed to motivate adults to make</u> <u>clean hands part of their daily lives. Download and share</u> <u>them to help spread the word and encourage</u> <u>handwashing within your community.</u>



^{1.} CDC When and How to Wash Your Hands



Cloth Face Coverings

Teach and reinforce use of <u>cloth face coverings</u>. Face coverings may be challenging for students (especially younger students) to wear in all-day settings such as school. Face coverings should be worn by staff and students (particularly older students) as feasible, and are most essential in times when physical distancing is difficult. Individuals should be frequently reminded not to touch the face covering and to <u>wash their hands</u> frequently. Information should be provided to staff, students, and students' families on proper use, removal, and washing of cloth face <u>coverings</u>.

Cloth face coverings are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. Cloth face coverings are not surgical masks, respirators, or other medical personal protective equipment.¹

^{1.} CDC Considerations for Schools

How to Properly Wear a Face Covering

- Wash your hands before putting on your face covering
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily¹

Who Should Wear	Who Should Not Wear
Face Coverings	Face Coverings
 People older than 2 years of	 Children under age 2 Anyone who has trouble
age in public settings where	breathing, or is unconscious,
other social distancing	incapacitated or otherwise
measures are difficult to	unable to remove the mask
maintain	without assistance ²

How to Protect Yourself and Others

Print Resources Web Page: https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html

Know how it spreads

There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19).
The best way to prevent illness is to avoid being exposed to this virus.

The virus is thought to spread mainly from person-to-person.



- » Between people who are in close contact with one another (within about 6 feet).
- » Through respiratory droplets produced when an infected person coughs, sneezes or talks.
- » These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- » Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

Everyone should

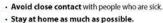
Clean your hands often



Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing. If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.

Avoid touching your eyes, nose, and mouth with unwashed hands.

Avoid close contact -





- Put distance between yourself and other people. » Remember that some people without symptoms may be able to spread virus.
- » This is especially important for people who are at higher risk of getting very sick. www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/peopleat-higher-risk.html



cdc.gov/coronavirus

Share the CDC information for safely wearing masks with faculty, students and families.

2. CDC About Cloth Face Coverings

^{1.} CDC How to Wear Cloth Face Coverings



Keep Supplies On-Hand

Support <u>healthy hygiene</u> behaviors by providing adequate supplies, including soap, hand sanitizer with at least 60 percent alcohol (for staff and older children who can safely use hand sanitizer), paper towels, tissues, disinfectant wipes, cloth face coverings (as feasible) and no-touch/footpedal trash cans.¹

The school nurse will be invaluable in making sure that your school has an adequate supply of the necessary items for promoting and reinforcing healthy hygiene decisions for the students and staff in each school building. <u>Having the right products for the safety, health, hygiene and prevention on-site will be critical for all involved.</u>

2. https://www.flinnsci.com/ppe/school-and-science-labs/

^{1. &}lt;u>CDC Considerations for Schools</u>

FLINN Scientific

Ask about our custom district solutions designed to support a safe return to school:

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- Full PPE for students, faculty, and support staff
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