EVALUATING SICK STUDENTS AND STAFF

Reopening Iowa's Schools Safely and Responsibly

HIGH RISK SYMPTOMS

New cough, shortness of breath or difficulty breathing, new loss of taste or smell

LOW RISK SYMPTOMS

Fever, headache, muscle and body aches, fatigue, sore throat, runny nose, congestion, nausea, vomiting, diarrhea

Students and staff members should remain home when sick. Students or staff members with <u>any</u> high-risk symptom or <u>two or more</u> low risk symptoms should stay home and are advised to seek an evaluation by a health care provider.

EVALUATION BY HEALTH CARE PROVIDER

NEGATIVE COVID-19 TEST

ALTERNATIVE DIAGNOSIS

Return to school after 24 hours with no fever (without the use of fever-reducing medicine) and symptoms improving

POSITIVE COVID-19 TEST

Return to school after 24 hours with no fever (without the use of fever-reducing medicine) and symptoms improving and 10 days since symptoms started

IDENTIFYING CLOSE CONTACTS FOR COVID-19 CASES

Close Contact: Individuals who've been within 6 feet for more than 15 minutes with a positive COVID-19 case during the infectious period. Contact may occur in a classroom, lunchroom, free period, during transportation to or from school, at practices or games, and during extracurricular activities.

SCHOOL WILL:

- · Notify local public health department
- Identify close contacts and quarantine exposed students and staff
- Notify appropriate school administration, families and staff (without identifying the COVID-19 case)
- · Provide Public Health with list of close contacts

PUBLIC HEALTH WILL:

- Recommend quarantine for all household contacts of COVID-19 case
- Work with school to determine which students and staff should be guarantined

STUDENTS

- If no symptoms develop, students can return to school 14 days from their last contact with the COVID-19 case
- If symptoms develop, students should be evaluated by a health care provider
- If a student tests positive for COVID-19, they should isolate for 10 days
- If a student tests negative for COVID-19, they must still complete their 14-day quarantine before returning to school

STAFF.

- Staff may be considered critical personnel and can be allowed to return to work if there are staffing shortages as long as they remain asymptomatic
- Staff should take their temperature and screen for symptoms at the start and end of each day, and wear a mask at work
- If symptoms develop, they must isolate immediately

INDIVIDUALS PREVIOUSLY POSITIVE

 Those who have been previously diagnosed positive for COVID-19 within the past 12 weeks, and were exposed to a COVID-19 case, do not need to quarantine







RETURN TO LEARN

Reopening Iowa's Schools Safely and Responsibly

COMMUNITY TRANSMISSION: NONE TO MINIMAL

0-5% positivity in county on average over the past 14 days

* Healthcare resources remain stable

SUGGESTED STRATEGIES

- Stay home if you are sick or exposed to someone confirmed to have COVID-19
- · Practice frequent hand-washing
- · Stay 6 feet from others as much as possible
- · Use face coverings when able to do so safely and correctly
- · Maintain frequent cleaning schedule using EPA-approved cleaning products
- · Monitor absenteeism among teachers, staff, and students

RETURN-TO-LEARN MODEL(S)

On-Site Learning following DOE, IDPH and CDC quidance.

Hybrid Learning as necessary based on:

- · Parent or quardian preference
- Student quarantine

COMMUNITY TRANSMISSION: MINIMAL TO MODERATE

6-14% positivity in a county on average over the past 14 days

* Healthcare resources remain stable

SUGGESTED STRATEGIES

- · Continue above strategies
- · Reduce group events/gatherings
- · Limit inter-school interactions
- Ensure student and staff groupings/cohorts are as static as possible and that interactions among groups of students and staff are limited

RETURN-TO-LEARN MODEL(S)

On-Site Learning following DOE, IDPH and CDC quidance.

Hybrid Learning as necessary based on:

- · Parent or quardian preference
- Student guarantine

COMMUNITY TRANSMISSION: SUBSTANTIAL CONTROLLED

15-20% positivity in a county on average over the past 14 days AND 10% absenteeism among students expected for in-person learning

Healthcare resources remain stable

SUCCESTED STRATEGIES

- Continue above strategies
- Consider regular health checks for any on-site students/staff if feasible
- · Cancel school events/gatherings
- Close communal spaces (e.g., cafeterias, media centers)

RETURN-TO-LEARN MODEL(S)

Hybrid Learning as necessary based on:

- · Parent or guardian preference
- Student quarantine

Temporary Continuous/Remote Learning for an entire school building or district for up to 14 days may be requested:

- Please contact the Department of Education by submitting your information via the CASA system.
- Only the Departments of Education and Public Health can make the determination and provide temporary authorization to move to 100% online or remote learning.

COMMUNITY TRANSMISSION: SUBSTANTIAL UNCONTROLLED

>20% positivity in a county on average over the past 14 days with healthcare resource capacity concerns

SUGGESTED

State and local education and public health officials should work closely together to make decisions on school operations.

RETURN-TO-LEARN MODEL(S)

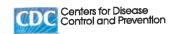
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How to Select. Wear. and Clean Your Mask Coronavirus Disease 2019 (COVID-19)

MENU >

CDC recommends that people wear masks in public settings, like on public and mass transportation, at events and gatherings, and anywhere they will be around other people.

Overview

- Wear masks with two or more layers to stop the spread of COVID-19
- Wear the mask over your nose and mouth and secure it under your chin
- Masks should be worn by people two years and older
- Masks should NOT be worn by children younger than two, people who have trouble breathing, or people who cannot remove the mask without assistance
- Do NOT wear masks intended for healthcare workers, for example, N95 respirators
- CDC does not recommend the use of face shields alone. Evaluation of face shields is ongoing but effectiveness is unknown at this time.
- Evaluation of mask and gaiter materials and structure is ongoing.

How to Select

When selecting a mask, there are many choices. Here are some do's and don'ts.









Wear a gaiter with two layers, or fold it to make two layers



Caution: Evaluation is ongoing but effectiveness is unknown at this time

Special Situations: Glasses



If you wear glasses, find a mask that fits closely over your nose or one that has a nose wire to limit fogging

Special Situations: Children



If you are able, find a mask that is made for children



If you can't find a mask made for children, check to be sure the mask fits snugly over the nose and mouth and under the chin



Do NOT put on children younger than 2 years old

How to Wear

Wear a mask correctly and consistently for the best protection.

- Be sure to wash your hands before putting on a mask
- Do NOT touch the mask when wearing it

Do wear a mask that

- Covers your nose and mouth and secure it under your chin
- Fits snugly against the sides of your face

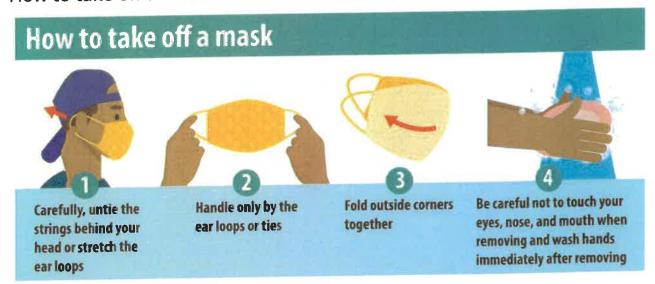
For more information, visit our How to Wear Masks web page.



How NOT to wear a mask



How to take off a mask



How to Clean

Masks should be washed regularly. Always remove masks correctly and wash your hands after handling or touching a used mask.

- Include your mask with your regular laundry
- Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the mask
- Use the highest heat setting and leave in the dryer until completely dry

For more information, visit our How to Wash Masks web page.



For more information, see our Masks web site. For information on the sources for our mask guidance, see Recent Studies.

Last Updated Oct. 29, 2020

Symptoms of COVID-19

| Symptoms of COVID-19 | Strep Throat | Common Cold | Flu | Asthma | Seasonal Allergies |
|--------------------------|-----------------|----------------|-----|----------|-----------------------|
| FEVER | Ø | | | | |
| COUGH | | | | ② | |
| SORE THROAT | | Ø | | | |
| SHORTNESS OF BREATH | | | | | |
| FATIGUE | | | | ② | |
| DIARRHEA OR VOMITING | | | | | |
| RUNNY NOSE | | | | | |
| BODY/ MUSCLE ACHES | | | | | |





ananners Little Learners

SYMPTOM SELF















sore throat

fever/chills

headache



cough/shortness of breath nausea/vomiting









lired





loss of taste or smell





FOR IMMEDIATE RELEASE

Contact: Amy McCoy

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IDPH Adjusts Quarantine Recommendations

The Iowa Department of Public Health (IDPH) is making a change on quarantine recommendations for people that have been exposed to a positive case of COVID-19. This applies in non-healthcare, non-residential settings only. This includes businesses, education and child care settings.

- Close contacts of COVID-positive cases will no longer need to quarantine for 14 days if a face covering was worn consistently and correctly by the positive case and close contacts. The positive case must isolate. The close contacts should self-monitor.
 - Self-monitoring entails close monitoring for COVID-19 symptoms over the subsequent 14 days, staying home if any symptoms develop, and speaking with a healthcare provider about COVID-19 testing in the case of any illness.
 - If people who are self-monitoring become ill but do not get tested, they should remain home until 10 days after symptom onset.
- People currently in quarantine may be released from quarantine if a face covering was worn consistently and correctly by the positive case and close contacts during exposure.
- If the positive case wore a face covering, but close contacts did not, those close contacts must be quarantined.
- If the positive case did not wear a face covering, close contacts must quarantine whether or not they wore a face covering.
- Quarantine of close contacts will still be necessary in residential and healthcare settings.

Please find an infographic depicting the new IDPH recommendations at https://idph.iowa.gov/Portals/1/userfiles/61/covid19/resources/WhenToQuarantine.pdf

Masks are proven to be effective in preventing the spread of COVID-19. Increased mask use will reduce the number of individuals that need to quarantine. Along with wearing a face covering, we ask that everyone continue all recommended public health strategies:

- Stav home when sick.
- Maintain social distancing of at least 6 feet whenever possible.
- Wash hands frequently.

This approach is based on data and focused feedback from community and school leaders over the past month indicating that transmission is not frequently occurring when both parties are wearing face coverings consistently and correctly. Additionally, we are aware of other jurisdictions, including Nebraska and Wyoming, that have made similar changes based on experiences in their states. We will continue to make recommendations based on best available information and adjust when needed.

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lowa Department of Public Health -- (515) 281-7689

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INFORMATION SHARING ON COVID-19 CASES FOR SCHOOLS AND LOCAL PUBLIC HEALTH

Given the need to notify potentially exposed individuals timely, and given the public's expectation of ongoing information, the following guidance is meant to assist schools in information sharing. Below, we provide summary guidance and considerations for sharing case information related to school settings.

SCHOOLS AND LOCAL PUBLIC HEALTH - INTERNAL SHARING OF INFORMATION

- State and local public health staff are authorized to disclose the name of a COVID-positive student, teacher, or other staff member to the person's school if disclosure is necessary to conduct the disease investigation and institute control measures.
- Schools are authorized to disclose the names of a COVID-19 positive student, teacher, other staff member, and case contacts to state and local public health officials.
- Please see the attached legal memo that will provide more extensive detail and legal analysis.
 https://bit.ly/3hwwOMY

SCHOOLS AND LOCAL PUBLIC HEALTH - SHARING INFORMATION WITH THE PUBLIC

- Federal and state laws generally prohibit public health and school officials from disclosing identifying information about positive COVID-19 cases in a public manner.
- Local public health officials should not release information to the public about cases at school settings, similar to how they do not release this information for outbreaks at businesses. See confidentiality provisions in <u>lowa Code Section 139A.3(2)</u>.
- Schools should work to notify the school community experiencing cases in order to protect students' health, and should follow long-standing requirements for infectious disease notifications.
- If schools choose to share case information further with the public, such as via public dashboards, they should make considerations to protect the confidentiality of students in the school setting:
 - Release case counts only when there are 100 or more total students in the student population at a location
 - Schools that have no cases can report zero cases
 - Schools with counts of 6 or more cases can release specific case counts
 - Schools with 5 or fewer cases should not provide a specific count, but can confirm there are cases within the school population
 - No other demographic identifiers should be included in the school-level release
- Local public health and school officials should contact their legal counsel in determining the nature
 and scope of information to provide in order to find the appropriate balance of protecting the public
 while protecting the privacy of individual students and staff, as well as the health of the educational
 community as a whole.

LOCAL PUBLIC HEALTH - SHARING ZIP CODE LEVEL DATA

- Case counts can be released by state or local public health by zip codes if 100 or more people reside in the zip code under the following circumstances:
 - · Zeros can be released
 - Counts of 6 or greater can be released
 - Counts of 1 through 5 should be suppressed and identified only as having between 1 and 5 cases (no individual counts given)
 - No other demographic identifiers are included in the zip-code level release

STATE REPORTING OF SCHOOL CASES - SUMMARY

While local public health and schools have long-standing and effective reporting community notification processes, we understand this situation is different. We continue to monitor the situation and stand ready to change this approach if the need arises.

COVID-19 Response: When to Quarantine For Business, Education, and Child Care Settings

For non-healthcare, non-residential settings, quarantine is no longer recommended if a potential exposure occurs while both the infectious individual and the close contacts are wearing face coverings consistently and correctly.

- In all scenarios below, an individual is considered a close contact when they have been within 6 feet of the COVID-19 positive individual for 15 minutes.
- Individuals who are a close contact due to exposure to a household member are required
 to quarantine for at least 14 days. Quarantine is used to keep someone who might have been exposed
 to COVID-19 away from others.
- Individuals who have COVID-19 must isolate for at least 10 days. Isolation keeps someone who is infected with the virus away from others, even in their home.

