

COUNTY OF BUCKS

DEPARTMENT OF HEALTH

Neshaminy Manor Center, 1282 Almshouse Road, Doylestown, PA 18901 - 215-345-3318

FIELD OFFICES

Bucks County Government Services Center, 7321 New Falls Road, Levittown, PA 19055 – 267-580-3510

Bucks County Government Services Center, 261 California Road, Suite #2, Quakertown, PA 18951 – 215-529-7000

County Commissioners

DIANE M. ELLIS-MARSEGLIA, LCSW, Chair

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Director

DAVID C. DAMSKER, M.D., M.P.H.

6/30/20

FREQUENTLY ASKED QUESTIONS

BUCKS COUNTY HEALTH DEPARTMENT SCHOOL REOPENING GUIDANCE

- 1) If there is a confirmed positive case in a student or staff member, do we have to shut down the classroom and/or the school?

No, that is absolutely not our recommendation. The preponderance of current evidence continues to suggest that children are less likely to be infected, less likely to have severe symptoms, and are at lower risk of spreading the disease to others. This has also been the situation so far in Bucks County case investigations. As COVID-19 will likely be with us for an extended period of time, and given that all school districts will almost certainly have cases, we want school districts to begin treating it similarly to the way we have successfully handled other communicable diseases in our schools, including pertussis (whooping cough), measles, strep throat, mumps, influenza, and meningitis. It is our strong intention to keep all classrooms, schools, and districts open, in the event of confirmed cases of COVID-19. One closure decision can lead to a potentially crippling, and precedent setting, domino effect of closures throughout the school district, and in other districts. We will work in conjunction with the principal and/or the superintendent on next steps for efforts to continue school/classroom activities without sending all contacts home. Depending on the situation, this may involve simply conducting enhanced surveillance for signs and symptoms and increasing sanitation and hygiene in the affected areas. Multiple cases may involve modifications to social distancing or mask usage.

- 2) If a student or staff member is confirmed positive, what are the steps to follow?

The Bucks County Health Department should be notified immediately, if we were not already aware. As part of all COVID-19 case investigations, information will be quickly obtained from the student or staff member as to their close contacts since the onset of their symptoms. The actual nature of the contacts will be explored in detail, and multiple variables (i.e. was the case actually symptomatic during school or did the case only develop illness at home) will be considered. We expect the school districts will provide information to assist our contact tracing efforts as much as possible. Once the information has been gathered, students and staff considered close contacts to the case (if any) will be notified of their exposure, using as little identifying information about the case as possible. Any mitigation steps will then be evaluated by the school and the health department as explained in question #1.

- 3) What happens if a student or teacher becomes symptomatic during school hours?

First, the student or teacher should leave the classroom immediately, put on a mask, and report to the nurse's office. The nurse should fully assess the student/teacher, including a temperature check and questions about any pre-existing conditions that may explain the symptoms. As the situation warrants, the nurse should contact a parent/guardian to arrange for transportation off-site. Staff and students with elevated temperatures should likely leave the building regardless of cause. The student or teacher's desk area should be sanitized prior to further usage. The student or teacher would then need to either get a COVID-19 test or medical clearance to

return to school. The school should continue to operate as normally as possible until additional information becomes available on the student or teacher's status. There are many common reasons other than COVID-19 that could explain someone not feeling well at any particular time. Notifications would not be warranted in the absence of further details.

- 4) What if my child has allergies or another chronic medical condition that often cause some of these same symptoms?

Parents should communicate ahead of time (if possible) with the school nurse and alert them to these conditions, so that a plan is in place in the event symptoms develop during school. For example, in order to differentiate between asthma and COVID-19 related shortness of breath, when a student uses his/her inhaler, the symptoms should improve as expected. Or a student with chronic allergies having a mild cough and runny nose whose symptoms may be explained through clear improvement with an anti-histamine.

- 5) Why aren't temperature readings required for all students upon entry to school?

The majority of Bucks County COVID-19 cases either never had a fever at all, or did not develop a fever until after having other symptoms for several days. A negative temperature reading can lead to a false sense of security, as well as long lines/crowds outside of the school. The most important aspect of recognizing illness comes from thorough symptom screening.

- 6) If parents are required to perform a symptom screen on their children prior to putting them on a bus or bringing them to school, what specifically should they be looking for?

The most common signs and symptoms include the following: fever greater than 100.3 degrees, cough, shortness of breath, headaches, body aches, fatigue, loss/altered sense of taste or smell, diarrhea, and runny nose/congestion. As an additional safety check, the first teacher (e.g. first period, home room, classroom teacher) that comes in contact with students each day will remind them of the signs and symptoms of COVID-19, with a prompt to go to the nurse immediately if feeling symptomatic.

- 7) How can we manage social distancing with our low incidence groups who will not understand or cannot comply due to safety and personal care concerns?

Schools should attempt to place individuals with low incidence disabilities in smaller, more personalized classrooms, with additional support staff as possible. Prior to school restarting, schools should communicate with parents/guardians to address any outstanding concerns. Effective virtual therapy services should be used as much as feasible.

- 8) Why are masks required for children on buses, but not in classrooms?

Masks will be optional while present in school. Extended daylong usage of masks by most children is unrealistic, causing discomfort, distraction, and/or mishandling. Students will touch their face more frequently and can easily contaminate and/or render the mask ineffective, and in the worst case, possibly spread disease. Additionally, some students, for various medical reasons, are unable to wear them. Masks also make it difficult to speak or ask questions in a classroom setting. Mask-use is more appropriate on a school bus, a less-controlled setting where social distancing is more difficult to maintain. However, in this situation, the duration of mask usage is only for a brief, defined period of time, increasing the likelihood of successful usage.

- 9) Why is a three foot minimum, instead of six, acceptable in the classroom?

Classroom configurations will be altered for maximal social distancing, with as close to six feet as feasible. However, in order to meet the needs of students, this may be less than six feet in many situations. SARS-CoV-2 is spread most commonly through large respiratory droplets when someone coughs or

sneezes. A minimum three-foot distance is clearly associated with significant reductions in infection via respiratory droplets, as most droplets do not travel more than 3 feet due to gravity. This is the current standard used by the World Health Organization (WHO) successfully in many countries throughout the world today.

10) What is the protocol for a student or staff member to return to school after being sent home with symptoms?

The student or staff member should remain home until either a negative COVID-19 test is completed, or other medical clearance to return is received.

11) What is the protocol for a student or staff member to return to school after testing positive?

After a positive test, with clearance from the Health Department or the student/staff member's physician, a symptomatic student or staff member can return 10 days from symptom onset (inclusive of 72 hours without fever), without any additional testing required. If an asymptomatic student or staff member tests positive, the health department will fully investigate the case and determine the return criteria.

12) What if a household contact of a student or staff member tests positive?

If a household family member of a student or staff member tests positive, the health department would then decide based on the exposure and case investigation information gathered as to how long, or even if, that student or staff member should be kept out of school under quarantine.

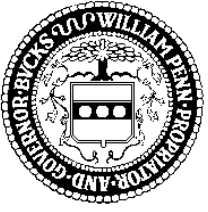
13) What about a student athlete or coach at practice who develops symptoms?

First, the student or coach should leave the field of play/practice immediately, and put on a mask. Students should contact a parent/guardian to arrange for transportation off-site. Any common equipment touched by the student or coach should be sanitized prior to further usage. The student or coach would then need to either get a COVID-19 test or medical clearance to return to school/practice. The other players on the team should continue to practice normally, as feasible, until additional information becomes available on the student or coach's status. There are many common reasons other than COVID-19 that could explain someone not feeling well at any particular time, and it is not practical to halt the team activities every time a player or coach feels unwell. Notifications, in most situations, will not be warranted in the absence of further details.

14) What if a student athlete or coach is confirmed as positive?

Following the same steps in question #2, we will work in conjunction with the athletic director, the principal, and/or the Superintendent on next steps for efforts to continue carry on with team activities. Again, depending on the details, team activities may likely be able to continue with additional precautions/modifications in place. As in question #1, careful thought must be given to the long-term and precedent setting decision to suspend athletic events from a case of COVID.

David C. Damsker, MD, MPH
Director
Bucks County Health Department



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June 15, 2020

GUIDANCE FOR BUCKS COUNTY SCHOOL REOPENINGS

Dear Chief School Administrators,

The COVID-19 pandemic has been a tremendous challenge for our community in many different ways. Our schools were put in the unenviable position of having to close suddenly and deal with a situation no one had ever encountered. Both your partnership with the Health Department and your enduring dedication to prioritize the health and safety of all school stakeholders during these trying times have been greatly appreciated.

The County, from the start, has put into place strong measures to contain and track the virus over time, allowing us to understand how and where infections were likely originating. Bucks County has achieved a consistent pattern of low levels of baseline pure community spread, defined as those cases whose source of infection cannot be determined. If we continue on the same course, the Governor is expected to move the County to the “green” status no later than June 26.

We now face the task of planning for a safe, and reasonably normal, return to school in just a few short months. With the support of everyone involved, including students, their families, and district staff, this can be accomplished effectively.

Earlier this month, the Pennsylvania Department of Education (PDE) released preliminary guidance requiring each school district’s board of school directors to create and approve its own “Health and Safety Plan” prior to reopening for in-person instruction. To accomplish the goal of having individualized plans to meet the specific needs of Bucks County, PDE has indicated that the guidance be created in consultation with the local health department.

While each school entity has unique characteristics of size, geographic location, school design, graduation requirements, and local board policy, consistency in procedure and practice among Bucks County’s school districts is desirable to the fullest extent possible. Regardless of how they might vary, all plans will be centered on the health and safety of students and staff.

I, along with Scott Forster, the director of the Bucks County Emergency Management Agency, have met regularly with you – the Intermediate Unit executive director, 13 local superintendents, and three career and technical school directors – for many months, beginning prior to the closures. This collaboration has allowed for the development of guidance based on medical and public health expertise in consultation with the needs and realities of school operations.

While health and safety considerations are paramount, guidance also is rooted in our understanding and belief that social interaction and in-person instruction is essential to our children’s emotional well-being, as well as their educational growth and advancement.

The Bucks County Health Department's guidance consists of a spectrum of interventions and strategies that, when applied consistently, work in combination to reduce the overall risk of infection and spread. No single precaution, or set of precautions, will completely eradicate COVID-19 or prevent its transmission. Though there is built-in flexibility to address the possibility of varying conditions over time, at this time there is a low prevalence of disease in the community, and the Bucks County Health Department will be adopting an overall long-term approach that begins to treat COVID-19 similarly to other contagious diseases that are found in our schools.

Highlights of the guidance include the following:

- Symptom screening will be done by all parents/guardians at home each morning before the school day. No children with symptoms will be sent on a bus or brought to school.
- All district staff will perform a symptom screen on themselves prior to leaving for work, and will stay home if ill.
- Temperature screening will not be required upon entrance to school for students or staff.
- Students and staff will consistently be made aware of the signs and symptoms of COVID-19.
- Students and staff will go to the nurse immediately if feeling symptomatic.
- Wearing masks will not be required of students while in school, but will be optional. Extended usage of masks often leads to discomfort, distraction, or mishandling/misuse, triggering a child to touch their face more frequently and causing contamination and/or rendering the mask ineffective. Masks also make it difficult to speak or ask questions in a classroom setting. Removing symptomatic children from the schools, coupled with Bucks County maintaining a low level community prevalence of COVID-19, will decrease the overall risk of infection in a given classroom. However, students and staff will have masks with them at all times in the event that their use is required, including in a school vehicle, if the individual becomes symptomatic, or if the minimum social distancing cannot be maintained.
- Staff, when not able to socially distance from students in the classroom, will utilize either a face shield or mask.
- Six foot distancing is not required for classroom seating – a lesser distance is acceptable if six feet is not achievable to meet the needs of students. There will be a minimum spacing of three feet, the social distancing recommended by the World Health Organization (WHO), as a three-foot distance is associated with large reductions in infection via droplet spread of coughs and sneezes. Classroom configurations will be altered for maximal social distancing as feasible. For example, staggered rows of desks all facing the same direction, with limitations on face-to-face seating.
- All high-touch surfaces will be disinfected regularly, including water fountains, door handles, light switches, playground equipment, and student desks. Students and staff will be encouraged to use individual water bottles from home or disposable plastic bottles.
- All individuals in school will sanitize or wash their hands on a frequent basis. Hand sanitizer will be made available in all common areas, hallways, and/or in classrooms where sinks for handwashing are not available.
- Classrooms and common areas will be ventilated with additional circulation of outdoor air when possible, using windows, doors, and/or fans.
- Buses can operate with a maximum of two students per seat, with the understanding that masks will be required of students while on the bus. Disinfect all high-touch surfaces on buses at least daily. Bus drivers will also be required to wear face shields and/or masks when students enter/exit the bus. Drivers may choose to