

SPS Revised*** Reopening Health Plan Related to COVID-19

DUE TO THE ONGOING AND EVOLVING PANDEMIC UPDATES, THIS HEALTH PLAN IS SUBJECT TO CHANGE AS DIRECTED BY STATE LAW AND CDC RECOMMENDATIONS.

All staff and students are responsible for following the NJ State regulations and the Centers for Disease Control (CDC) recommendations to reduce transmission of COVID-19 while attending school each day:

- [New Jersey COVID-19 Information Hub](#)

AND specific to schools:

- [COVID-19 Information Hub | Search](#)
- [\(CDC\) Coronavirus Disease 2019 \(COVID-19\)](#)

While there is much information available from many resources, these are the primary resources that we reference for up to date information to keep our school community safe.

School year 2021-2022 we will continue to:

- **Wear a mask** at all times while inside the building ensuring it covers the nose and mouth fully. The mask may be removed to eat or drink either while maintaining distancing. All staff and students are required to provide their own mask and should have a backup mask available every day. The mask must be in place before entering the building. Mask should be clearly identified with wearers name. State guidelines allow for the mask to be removed during physical education: *When a student is participating in high-intensity physical activities during a physical education class in a well-ventilated location and able to maintain a physical distance of six feet from all other individuals*
- **Wash hands** on arrival, after use of bathroom, before and after eating, and after use of tissues. Handwashing must be done for 20 seconds, thoroughly on all hand surfaces, using soap and water. Hand sanitizer that is a minimum 60% alcohol base may also be used if a sink is not readily available. Stations are in place throughout the school building.
- **Watch where you are** always and maintain the recommended physical distancing. Cohorting classes is expected to minimize disruption to in-class learning.
- **Windows will be open** in classrooms for improved ventilation; use of HEPA filters will be employed in the front office, nurse's office, isolation room, and other areas of the building as needed.

****Stopping transmission is the best way to mitigate the impact of the pandemic****

COVID symptoms include:

- Fever > 100.4°F
- Cough
- Difficulty breathing
- Fatigue
- Chills
- Congestion/runny nose
- Muscle pain
- Loss of taste/smell
- Headache
- Sore throat
- Nausea, vomiting, diarrhea

Many of the above symptoms may also be symptoms of common upper respiratory viral illnesses including the common cold and influenza or may be symptoms of allergies. Testing is available for COVID-19, RSV and influenza.

Anyone exhibiting the following symptoms needs immediate care as they are possible signs of hypoxia (low oxygen level) and indicate more severe illness:

- Blue lips
- Increased respiratory rate and shortness of breath
- Chest pain with breathing
- Waking from sleep with shortness of breath
- New onset confusion or difficulty waking up

Terms to understand:

Case: a person with a confirmed positive COVID-19 test. A rapid test, if done, should be followed with a polymerase chain reaction (PCR) test within 48 hours of the rapid test. The PCR test is considered the gold standard and the result of the PCR test is considered the final true result.

Close Contact: a person who has had any of the following:

- Direct physical contact with a case
- Has been within 6 feet of a case for a cumulative period of 15 minutes over a 24 hour period
- Has been greater than 6 feet away from a case from but in the same room for an extended period of time

Fully Vaccinated: people are considered fully vaccinated: 2 weeks after their second dose in a 2-dose series, such as the Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine, such as Johnson & Johnson's (J and J) Janssen vaccine. The Pfizer vaccine is vaccine approved for ages 12 and over. Moderna and J and J are approved for ages 18 and older. If a fully vaccinated person is a close contact of a case, they do not have to quarantine. They should continue to monitor for symptoms and seek medical care immediately if symptoms develop. To maintain fully vaccinated status, any required boosters must be received.

Incubation period: defined as the period during which a person develops symptoms. 95% of patients that do develop symptoms will do this between 2-14 days from exposure; 5% by day #2; 50% by day #5; 95% by day #14.

Infective (contagious) period: defined as the period during which an infected, positive person can transmit virus to another person. Begins 48 hours before signs and symptoms appear and goes through at least 10 days after onset of symptoms and until a person has been fever-free for 24 hours without the use of any fever reducing medication (acetaminophen/ibuprofen).

Risk factors include any variants that are associated with an increased risk of disease or infection. With COVID these include: 65 years and older, obesity, diabetes, hypertension, any lung disorder, heart or liver or kidney disease, weakened immune system (including the use of immunosuppressant medications).

Transmission (spread) of the disease from an infected person to others is mainly while talking, laughing, coughing, sneezing, breathing, singing. The droplets are shed from the respiratory tract of the infected person – including the mouth and/or nose – and enter another person through their mouth, nose, and/or eyes. Also, contact with surfaces may transmit the virus from hand to mouth, nose, and/or eyes, although less common.

Isolate: what a case or a confirmed positive person does to contain the virus. Includes removing themselves from as much contact with other people as possible and securing help with getting food, medications, other needs met. Keeps known infectious people separate from healthy people. Isolation is for a minimum of 10 days after symptom onset and an additional 24 hours after symptoms resolve with

no fever. Day of symptoms onset is day 0. If an asymptomatic person is tested and found positive, the 10-day isolation period begins on the day the test was performed.

Quarantine: what an unvaccinated close contact does to curtail possible spread. This restricts healthy people who had contact with a known positive person. Must quarantine for 14 days from the last day of contact with the infected person. If an unvaccinated contact lives with a case, the contact need to quarantine for 14 days after the case isolation ends; this can possibly be a full 3 weeks.

Reproductive number is referred to as the R_0 (spoken, "R naught"). Defined as number of people one infected person will infect if everyone that person has contact with is susceptible. Measles has highest known $R_0 = 15$. COVID and flu have R_0 of 2-3. Cutting that number is essential to stopping transmission and the focus of contact tracing.

Super spreader event: an event with an unusually high reproductive number.

Unvaccinated (COVID-19): Unvaccinated people refers to individuals of all ages, including children, that have not completed a vaccination series or received a single-dose vaccine.

From the Princeton Department of Health (DOH):

- Students and staff must go to the nurse immediately if feeling symptomatic or if others point out signs of illness to them.
- If in the nurses judgement, the signs or symptoms are consistent with COVID-19, arrangements must be made for the person to immediately leave the school.
- Each school must provide an isolation room to hold ANY PERSON who is symptomatic between the period of identification and prior to their exit from the school.
- Each school must create a personal protective equipment (PPE) policy in accordance with CDC or NJDOH guidance for nurses while dealing with symptomatic students or staff.
- During this COVID-19 pandemic, asthma treatments using inhalers with spacers (with or without face mask, according to each student's individualized treatment plan) are preferred over nebulizer treatments whenever possible. Use of asthma inhalers (with or without spacers or face masks) is not considered an aerosol-generating procedure.
- Reporting of confirmed cases: All positive school cases of COVID-19 in Princeton will be reported to the Princeton DOH.
- The DOH will provide guidance to the school via a designated contact person. The school will be responsible to determine degree of "close contact" with a known positive person and determine the need for quarantine for any individual or group of individuals that were exposed in the school.
- The DOH does not conduct contact tracing on individuals within the school. Any positive individual should self-report results to their own local department of health and follow their guidance while they are in isolation. The state attempts to notify positive cases to all local Departments of Health but that depends on accurate reporting to the state which is why an individual should self-report also.

Health plan for SPS related to COVID-19

The school nurse will keep an accurate daily log of all absences. ***Parents/guardians must contact the school nurse directly to report an absence*** and must include the reason for the absence. Parents may leave a voice mail if calling during hours when the school building is not open and may expect a call back from the nurse if follow up is needed.

- The school nurse has the responsibility to stay informed regarding COVID-19 updates and how it applies to school nurse practice.
- The school nurse is responsible for the health of all students; therefore, decisions related to health must include the school nurse.
- Student contact information must be up to date in Genesis.
- All students will report directly to their assigned classroom after arrival. Faculty are expected to contact the nurse immediately with any student of concern reporting any signs of illness or changes in behavior/concerns with a student.
- Parents and guardians should be mindful of any COVID symptoms and contact their child's health care provider immediately and the child SHOULD NOT COME TO SCHOOL. Parents will not need to submit an electronic daily health screening.
- The school nurse will maintain a log of all students seen in the nurse's office.
- Students needing health care during the school day will be kept separate from students with COVID-19 symptoms.
- The school nurse will make the final decision regarding disposition of someone with COVID-19 signs/symptoms.
- Any student who develops symptoms of COVID-19 during the school day will be moved to the designated isolation room while waiting to be sent home. All unvaccinated siblings will also be sent home. Parents/guardians are asked to come promptly to pick up any student that is being sent home.
- Personal protective equipment (PPE) will be kept in the nurse office and be worn if necessary.
- A confidential log will be kept of all students, household contacts, and staff who are reported with a documented positive COVID-19 test result along with the date they are cleared to return to school.
- The principal and vice principal will be informed of all absences and reasons for absence daily, any student/staff with COVID-19 symptoms, any student/staff reported with a positive test, and/or any student/staff with known positive immediate family members who reside with that student/staff.
- Any positive COVID-19 case will be reported to the local Princeton Department of Health.
- **For students/staff to return to school after an absence for illness that included symptoms of COVID-19, they must present a note from a health care provider that clears them to be back in school.**
- Any student with COVID-19 compatible symptoms should not return to school until they have either received a negative viral test (molecular or antigen) for SARS-CoV-2 or they have completed an isolation period of at least 10 days since symptom onset and at least 24 hours after resolution of fever without fever-reducing medications with symptom improvement.
- **If any member of a family is having a COVID-19 test for reasons of illness or close contact, all family members must stay home while awaiting results of test.**
- **The school nurse must receive the results of a COVID-19 test on a student/staff person or close household contact in writing.**

- SPS may need to temporarily close school and move to remote learning if a positive case or cases result in high numbers of students or staff needing quarantine, if staffing cannot be safely maintained, or on the advice of the Diocesan Superintendent of Catholic Schools.
- The school nurse will clean all high-touch surfaces in the nurse office throughout the school day using Lysol wipes or other approved product.
- The school nurse will collaborate with the school counselor regarding students with mental health needs.
- Cleaning and disinfecting is planned throughout the day to all high-touch surfaces and after hours in the entire building. In the case of a school closure, sanitizing will be done throughout the school and additional campus buildings as necessary.

References:

Centers for Disease Control and Prevention FAQs:

[cdc.gov/coronavirus/2019-ncov/faq.html](https://www.cdc.gov/coronavirus/2019-ncov/faq.html)

CDC Cleaning & Disinfecting Your Facility:

[cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html](https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html)

New Jersey COVID-19 Information Hub:

[COVID19.nj.gov/](https://www.COVID19.nj.gov/)

American Academy of Pediatrics on COVID-19:

[healthychildren.org/English/health-issues/conditions/COVID-19/Pages/default.aspx](https://www.healthychildren.org/English/health-issues/conditions/COVID-19/Pages/default.aspx)

Johns Hopkins Coronavirus Resource Center:

[coronavirus.jhu.edu/](https://www.coronavirus.jhu.edu/)

National Association of School Nurses:

[nasn.org/home](https://www.nasn.org/home)

New Jersey Department of Health

[nj.gov/education/roadforward/docs/HealthAndSafetyGuidanceSY2122.pdf](https://www.nj.gov/education/roadforward/docs/HealthAndSafetyGuidanceSY2122.pdf)

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**** Revised 1/7/2021**

***** Revised 8/18/2021**