

St. John School, Canton COVID-19 Health Handbook 2020-2021

COVID-19 Point Person - Mrs. Tara Medeiros

Updated August 26, 2020

SJS Nursing Care During Pandemic

Asthma and Inhalers

According to the CDC, people with asthma should use inhalers with spacers (with or without a face mask, according to each student's personal treatment plan) instead of nebulizer treatments whenever possible during the COVID-19 pandemic. It is best for students to have two spacers, one for home and one for school. If a student does not have their own spacer, consider using cardboard spacers, disposable mouthpieces or a plastic Inflocone™. The American Lung Association's Model Policy for School Districts: Stock Bronchodilators recommends using inhalers with disposable spacers or mouthpieces.

Daily Medications

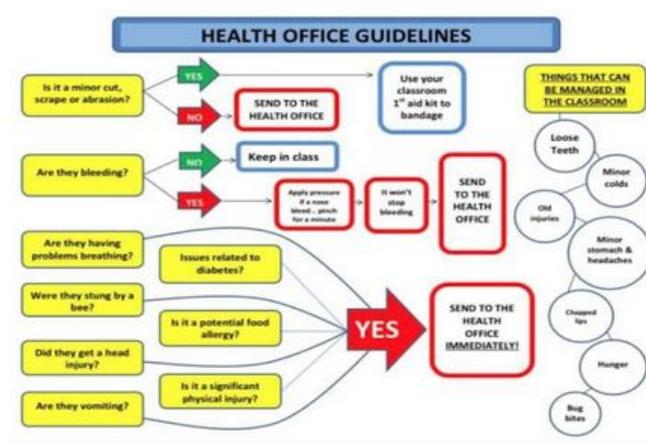
Daily medications can be dispensed in the second floor health office as long as the student is not ill. Medications can also be dispensed in the church basement during the pandemic to service medically complex students. Daily medications include insulin for diabetes, inhalers for asthma, oral medications for inattentiveness.

First aid

Staff are first aid trained. First aid can be provided in the classroom to decrease volume, visits and exposure to COVID-19 and other illnesses in the health office.

Health Office Visits During Pandemic

We will use the flowchart below to assist in decision making when deciding to send a student to the health office. Staff are first aid certified and some care can be provided in the classroom to avoid exposing students to COVID-19 or other illnesses.



Mask/Face Coverings

Masks and face coverings that cover the nose and mouth are mandatory for students in kindergarten and up. Students in preschool and prekindergarten are also required to have a mask/face covering with them at all times. Masks/face coverings should be made of a tightly woven fabric, such as cotton or cotton knit, be comfortable for extended wear, and be washed daily. All staff and visitors are required to wear a mask that covers the nose and mouth upon entering St. John School or while being outside and being unable to maintain six feet of social distance. The only exceptions for mask-wearing are meals, mask breaks, documented medical exemptions filed with the school nurse. Refusal to wear a mask will prohibit a student from participating with peers during in-person instruction.

Families are encouraged to purchase reusable cloth masks that are cleaned daily. Students should have a mask for each day they are in school if it cannot be cleaned daily. Please send a backup mask with your child if the mask is soiled or needs to be replaced. Extra disposable masks will be available by the school for students who need them.

Masks/face coverings must be school appropriate. This allows for some creativity (sports teams, patterns, fun designs, etc) but prohibits political messaging as well as other inappropriate themes. A face shield may be worn in addition to a mask/face covering. However, a face shield is not a substitute for a mask/face covering.

Mask Breaks

Kindergarten and above will have mask breaks throughout the day, at minimum two times. During mask breaks, students must remain six feet apart. Ideally these mask breaks will be outside and/or in the Gym since that would ensure 6 feet of social distancing. If mask breaks occur in a classroom, windows will be opened and students will remain 6 feet apart. St. John School will furnish lanyards to students to use to protect masks. Student may also use other types of clips or bags. Lunch is considered a mask break.

Movement in the Building

-Once students are in their classrooms (after 8:40 am), there will be limited movement throughout the building. Mask breaks, bathroom breaks, lunch, and possibly specials will be designated movement times.

-Cohorts will move through St. John School together and interact with other cohorts as little as possible. Students will keep a minimum of three feet between each other in the hallways.

-We will develop schedules for movement outdoor, to the gym for lunch, and for bathroom use.

-From 9:00 am - 3:00 pm, the front stairwell on floors two and three will be closed to all except students who are sick. This is necessary since our health office is in the stairwell of floor 2 and our isolation room is located in the Guidance Office in the stairwell of floor 3.

Bathrooms and Water Bubblers

All student bathrooms will be limited to three student occupants at a time and every other stall/urinal will be closed. Students will be allowed to use water bubblers to fill water bottles. Water fountain use is prohibited. Students are encouraged to bring a water bottle to school and will be taught how to properly use a water bottle in the classroom. We will have a portable water bubbler in St. John Church basement classrooms.

Travel

St. John School will adhere to the Massachusetts COVID-19 Travel Order. All visitors and returning residents entering Massachusetts must follow these orders, children and adults. [Click here](#) for the full regulations, which include quarantining for 14 days or producing a negative COVID-19 test result upon your arrival in or return to Massachusetts, unless you are visiting from a lower-risk state designated by the [Department of Public Health](#). Please keep these in mind if you are planning any travel that would impact school attendance.

Influenza vaccine

All students will be required to receive an influenza vaccine for the current influenza season by December 31, 2020. Students may attend school after this date if they do not comply.

Health Attestation

[Health form to be filled out daily by staff and visitors](#)

Protocols for responding to COVID-19 scenarios in school

The following proposed protocols are developed with respect to the current recommendations from the Centers for Disease Control, Massachusetts Department of Public Health, Department of Elementary and Secondary Education and in collaboration with the Canton Health Department/Board of Health.

Introduction

A safe return to in-person school environments will require a culture of health and safety every step of the way. Specifically:

- **It is not one mitigation strategy but a combination of all these strategies taken together that will substantially reduce the risk of transmission.** No single strategy can ever be perfect, but all strategies together will reduce risk. In addition, Governor Baker has announced that the Commonwealth will remain in Phase 3 of Reopening Massachusetts in significant part to help support an overall environment for the safe return to our schools for as many students, staff and teachers as possible. Further with the announcement of the municipal specific COVID-19 metrics produced weekly since August 5, there is additional information on the collective continued vigilance towards health and safety measures to continue to contain COVID-19.
- **Staff must monitor themselves for symptoms daily and students, with the assistance of families, must also be monitored daily for symptoms.** Staff and students must stay home if feeling unwell. Everyone must do their part to protect others and not come to school if they are exhibiting any COVID-19 symptoms or are feeling sick.
- **Masks are among the most important single measures to contain the spread of COVID-19.** We require students second grade and above and all staff to wear masks that adequately cover both their nose and mouth. Whenever possible, students in pre-kindergarten through grade 1 who can safely and appropriately wear, remove, and handle masks should do so. Exceptions must be made for students with medical, behavioral, or other challenges who are unable to wear masks/face coverings.

- **Hand hygiene is critical.** Students and staff are required to exercise hand hygiene (handwashing or sanitizing) upon arrival to school, before eating, before putting on and taking off masks, and before dismissal. Handwashing with soap and water for at least 20 seconds is the best practice. However, hand sanitizer containing at least 60% alcohol should be substituted when handwashing is not available. Hand sanitizer stations should be set up where school staff are typically present, such as common areas, hallways, and classrooms. While the application of hand sanitizer may be necessary throughout the school day (especially if hand washing is less accessible) and does not require specialized instructions for use, districts and schools should avoid placing sanitizer stations in areas that are not typically supervised through the regular presence of staff.
- **Physical distance greatly reduces the risk of transmission.** Physical distancing is a critical tool in preventing the spread of COVID-19. The CDC and DPH recommend 6 feet of distance between individuals. The World Health Organization and the American Academy of Pediatrics recommend a minimum of 3 feet of distance. DESE recommends that districts aim for 6 feet of distance where feasible. When 6 feet is not feasible, 3 feet is an acceptable minimum as long as staff and students wear masks covering the nose and mouth at all times. If the 3 feet minimum is applied on the bus, all staff and students regardless of age must wear masks at all times. Please note that decisions to apply a 3-foot minimum will likely increase the number of close contacts associated with the occurrence of a case.
- **Cohorts/assigned seating.** Students organized in groups/classrooms and other cohorts help mitigate transmission of the virus. Assigned seating is important because it effectively creates even smaller groups within cohorts which minimize transmission. Assigned seats can also assist with contact tracing. Wherever possible, seats should be assigned (including classroom, bus, meals).

To support a culture of health and safety, schools must have robust and reliable ways to communicate with all families, students, teachers, and staff in order to send and receive key messages related to COVID-19.

Preparing to respond to COVID-19 scenarios

Even as we remain vigilant, and public health metrics in Massachusetts remain positive, the risk of exposure to COVID-19 in school will not be zero. As we prepare to reopen schools, we must also prepare to respond to potential COVID-19 scenarios, whether in school, on the bus, or in our communities. Depending on the circumstances, a positive COVID-19 test, a potentially symptomatic student, or exposure to someone in the outside community who has COVID-19 can each have health, safety, and operational implications.

Be prepared to provide remote learning

When students must stay home for quarantine or isolation, teaching and learning should not stop. It is the school's duty to provide remote learning for students who cannot be in school for any extended period of time.

Testing, tracing, and isolation

It is important to note that testing, combined with contact tracing and isolation, helps control the spread of COVID-19 in Massachusetts. All test results, both positive and negative, are reported to the Massachusetts Department of Public Health (DPH). When a person has a positive COVID-19 test, it is the local board of health or the Massachusetts Community Tracing Collaborative that will reach out to provide support so that these individuals can remain safely in medical isolation. They will also ask for help to identify close contacts. These organizations will then reach out to the individual's close contacts to provide important information that is aimed to stop the spread of the virus, including how to safely isolate/quarantine. While these organizations will provide support, to further assist with contact tracing the student/family and staff are asked to reach out to their personal contacts and notify the school.

Self-isolation for COVID-19 positive cases is a minimum of 10 days

Most people who test positive and have a relatively mild illness will need to stay in self-isolation for at least 10 days. People who test positive can resume public activities after 10 days and once they have:

- gone for 3 days without a fever (and without taking fever-reducing medications like Tylenol); and
- experienced improvement in other symptoms (for example, their cough has gotten much better); and
- received clearance from public health authority contact tracers (the local board of health or Community Tracing Collaborative).

Repeat testing prior to return is not recommended. Return to school should be based on time and symptom resolution.

Close contacts of a positive COVID-19 case should be tested. For general guidance, DPH defines close contact as:

- Being within less than 6 feet of COVID-19 case (someone who has tested positive) for at least 15 minutes. Close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case while the case was symptomatic or within the 48 hours before symptom onset, OR
- Having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on) while not wearing recommended personal protective equipment.

If someone in the school setting tests positive

If a student or staff member tests positive for COVID-19, their close contacts will be defined as only those who have been within 6 feet of distance of the individual for at least fifteen minutes, while the person was infectious. The infectious period begins 2 days prior to symptom onset. If someone is asymptomatic, the infectious period is considered to begin 2 days prior to the collection of their positive test. While previous guidance stated that all students in an elementary classroom would be defined as close contacts, this new guidance provides a narrower definition of a close contact which mirrors DPH guidance.

Policy of when a close contact may return to school

All close contacts should be tested but must self-quarantine for 14 days after the last exposure to the person who tested positive, regardless of test result. After further consultation with the medical community, we are updating this guidance as the virus can cause illness from 2-14 days after exposure and even asymptomatic individuals can transmit the virus. Going forward, even if an individual identified as a close contact receives a negative test result, they must continue to self-quarantine for the full 14 days as the virus may take up to 14 days to cause illness.

Policy of when a student/staff person may return to school after COVID-19 symptoms

If a student or staff member has COVID-19-like symptoms, they may return to school after they have tested negative for COVID-19, have improvement in symptoms, and have been without fever for at least 24 hours without the use of fever reducing medications. If a provider makes an alternative diagnosis for the COVID-19-like symptoms, the individual may return to school based on the recommendations for that alternative diagnosis (e.g., influenza or strep pharyngitis).

If a student or staff member presents COVID-19-like symptoms and chooses not to be tested, they may return to school 10 days from start of symptoms, as long as their symptoms have improved and they have been without fever for at least 24 hours prior to their return to school without the use of fever reducing medication.

Most common symptoms of COVID-19 and testing requirements

The single most important thing to do if any of the following symptoms are present is to **STAY HOME**. Our collective health relies, in part, on individual attention and responsibility. Note that some symptoms of COVID-19 are the same as the flu or a bad cold; please do not assume it is another condition. When in doubt, stay home.

Please STAY HOME if you have any of the symptoms listed.

Below is the full list of symptoms for which caregivers should monitor their children, and staff should monitor themselves:

- Fever (100.0° Fahrenheit or higher), chills, or shaking chills (CDC has lowered the temperature from 100.4 to 100.0)
- Cough (not due to other known cause, such as chronic cough)
- Difficulty breathing or shortness of breath
- New loss of taste or smell
- Sore throat
- Headache when in combination with other symptoms
- Muscle aches or body aches
- Nausea, vomiting, or diarrhea
- Fatigue, when in combination with other symptoms
- Nasal congestion or runny nose (not due to other known causes, such as allergies) when in combination with other symptoms

If staff or students have any of these symptoms, they must get a test for active COVID-19 infection prior to returning to school.

Every school should have a list of available test sites. A list of test sites is available here, and Massachusetts also has an interactive testing map. Staff and students who have symptoms should also contact their primary care physician for further instructions. More information related to the availability of testing will be provided later this summer.

Protocols for possible COVID-19 scenarios

While specific protocols vary, there are some common elements for each possible COVID-19 scenario:

Evaluate symptoms

Separate from others

Clean and disinfect spaces visited by the person

Test for COVID-19 and stay at home while awaiting results

If test is positive:

- Remain at home at least 10 days and until at least 3 days have passed with no fever and improvement in other symptoms
- Monitor symptoms
- Notify the school and personal close contacts
- Answer the call from local board of health or Massachusetts Community Tracing Collaborative to help identify close contacts to help them prevent transmission
- Secure release from contact tracers (local board of health or Community Tracing Collaborative) for return to school

Protocol: Student or staff tests positive for COVID-19

- The student or staff member must remain at home (except to get medical care), monitor their symptoms, notify the school, notify personal close contacts, assist the school in contact tracing efforts, and answer the call from local board of health or Massachusetts Community Tracing Collaborative. For most people who have relatively mild illness, they will need to stay in self-isolation for at least 10 days and until at least 3 days have passed with no fever and improvement in other symptoms.
- The student's parent/caregiver or the staff member informs the proper school official (e.g. a designated person that is the COVID-19 school lead) that the individual has tested positive for COVID-19. The designated COVID-19 school lead in turn notifies others as pre-determined by the school (e.g., school leadership, school nurse or school medical point of contact, building management, maintenance).
- Determine whether the student or staff member was on the premises during the time frame that started two days prior to symptom onset (or testing positive if not symptomatic) until the time of isolation.
- If so, promptly close off areas visited by the COVID-19 positive individual until such areas can be cleaned and disinfected, if they have not been cleaned and disinfected already.
- Promptly clean and disinfect the student's or staff member's classroom and any other facilities (e.g., extracurricular facilities) visited by the individual, if that has not been done already.
- Promptly clean and disinfect the bus(es) the student or staff member was on, if any, and if not already done.
- Communicate with families and staff of close contacts:
- The school should identify the student's or staff member's possible "close contacts" based on the assigned seating charts and proximity related to class activities. Close contacts will be defined as only those who have been within 6 feet of distance of the individual for at least fifteen minutes, while the person was infectious. This definition is for students, teachers and other staff. The infectious period begins two days before symptom onset (or two days prior to the date of the positive test if asymptomatic) and includes up until the time the student/staff/teacher was isolated. Consider students and staff members who were close contacts in class, other school spaces, on the school bus, or at extracurricular activities.

- Send a communication to the staff/teachers and families of students of close contacts that there has been a positive test without naming the individual student or staff member who tested positive.

Communications sent to families/staff should:

- Inform them there was a positive test (not the specific individual) in the student's class/bus or other activity.
- Explain that since the student/staff were within 6 feet of the person with a positive test for 15 minutes or more, they are considered a "close contact" and therefore should be tested. Having assigned seating and keeping up-to-date seating charts will help identify who should be instructed to be tested: specifically, those who were sitting next to the student, plus any others who also had close contact with the student.)
- Instruct close contacts to isolate prior to their test and while waiting for the results. In general, as the highest yield test will be a few days after the exposure, ideally, the test should occur no sooner than day 4 or 5 after the last exposure. (In other words, if an exposure lasted several days, the best time to test is 4 or 5 days after the end of the exposure period.)
- Close contacts should be tested for COVID-19 at one of Massachusetts's test sites. Sites may require pre-screening, a referral, and/or an appointment.
- Close contacts are asked to communicate their test results to the school. They should not return to school until they have quarantined for 14 days. This includes close contacts who receive a negative test result or who choose not to be tested.
- Remind families and/or staff of the importance of not having contact with higher-risk individuals (e.g., grandparents and those with underlying medical conditions). Remind families and/or staff of the list of COVID-19 symptoms for which to monitor.
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If the school finds out about the original COVID-19 positive test in the middle of a school day the school should quickly identify the individuals who may be "close contacts" of the student and notify students and their families.

- Make sure the students who could be considered close contacts are wearing masks, including students in pre-kindergarten through first grade. Extra masks as may be needed should be provided by the school. Enforce strict physical distancing. Require students to wash their hands.

- Caregivers of close contacts may pick students up prior to the end of the day. Caregivers must wear a mask/face covering when picking up their student. Students who are close contacts and students with any symptoms should not ride the school bus to get home. Caregivers and students, as well as staff, should wash their hands upon arriving at home and change their clothes as a precaution.
- Close contacts should not come back to school until they have quarantined for 14 days and are asked to communicate their test results to the school.
- As feasible, to assist with contact tracing, make a list including phone number and email of any other close contacts the student or staff member had, beginning two days before the onset of symptoms (or positive test if asymptomatic) until individual was isolated.

IF OTHERS IN THE SCHOOL TEST POSITIVE: Perform all steps under this protocol for that person. ALSO FOLLOW: “Protocol: Presence of multiple cases in the school.”

IF NO OTHERS IN THE SCHOOL TEST POSITIVE: Close contacts are asked to communicate their test results to the school. They should not return to school until they have quarantined for 14 days. This includes close contacts who receive a negative test result or who choose not to be tested.

Any area of the school visited by the COVID-19 positive individual must be closed off and/or cleaned and disinfected. The area can be used 12 hours after cleaning/disinfecting has occurred.

Protocol: Close contact of student or staff tests positive for COVID-19

- Current Massachusetts DPH guidance is that all close contacts of someone who has tested positive for COVID-19 should be tested.
- The student or staff member who was in close contact with someone who tested positive for COVID-19 should be tested at one of Massachusetts's test sites. Sites may require pre-screening, a referral, and/or an appointment.
- Close contacts should isolate at home prior to testing and while awaiting test results.
- Close contacts are asked to communicate their test results to the school. They should not return to school until they have quarantined for 14 days. This includes close contacts who receive a negative test result or who choose not to be tested. Because tests performed too early can be falsely negative, ideally the test should be performed no sooner than 4 or 5 days after the last contact with the person who tested positive.

IF POSITIVE TEST: The student or staff member should remain at home (except to get medical care), monitor their symptoms, notify the school, notify personal close contacts, assist the school in contact tracing efforts, and answer the call from local board of health or Massachusetts Community Tracing Collaborative. Most people who have relatively mild illness will need to stay in self-isolation for at least 10 days and until at least 3 days have passed with no fever and improvement in other symptoms. FOLLOW STEPS UNDER: "Protocol: Student / staff tests positive for COVID-19."

Protocol: Student is symptomatic at home

Family should monitor students at home each morning for the most common symptoms of COVID-19 (see list above).

IF NO SYMPTOMS:

Send student to school.

IF ANY SYMPTOM:

Do not send the student to school.

- Call the school's COVID-19 point of contact and inform them student is staying home due to symptoms.
- Current Massachusetts DPH guidance is that all symptomatic individuals in Massachusetts, even those with mild symptoms, should be tested. An individual who does not wish to be tested may return to school 10 days from start of symptoms, as long as their symptoms have improved and they have been without fever for at least 24 hours prior to their return to school without the use of fever reducing medication.
- The student should get tested at one of Massachusetts's test sites. Sites may require pre-screening, a referral, and/or an appointment.
- Isolate at home until test results are returned.
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Proceed as follows according to test results:

IF NEGATIVE: Students may return to school after they have tested negative for COVID-19, have improvement in symptoms, and have been without fever for at least 24 hours without the use of fever reducing medications. If a provider makes an alternative diagnosis for the COVID-19-like symptoms, the individual may return to school based on the recommendations for that alternative diagnosis (e.g., influenza or strep pharyngitis).

IF POSITIVE: Student should remain at home (except to get medical care), monitor their symptoms, notify the school, notify personal close contacts, assist the school in contact tracing efforts, and answer the call from local board of health or Massachusetts Community Tracing Collaborative. Most people who have relatively mild illness will need to stay in self-isolation for at least 10 days and until at least 3 days have passed with no fever and improvement in other symptoms.

FOLLOW STEPS UNDER: "Protocol: Student / staff tests positive for COVID-19.

Protocol: Student is symptomatic at school

- Although families are the most important first line of defense for monitoring symptoms, teachers will play an important role in referring possible symptomatic students to the school nurse or other medical point of contact. (Note: This will require training for teachers.)
- Teacher ensures the student is wearing a mask that fully covers nose and mouth at all times.
- Teacher calls the nurse or school medical point of contact to inform them that they have a possible case. Nurse or school medical point of contact comes to get the student from class.
- Nurse (or school medical point of contact) should evaluate the student for symptoms (see list above: “Most common symptoms of COVID-19”).

IF ANY SYMPTOM:

- Place the student in the designated medical waiting room. This space must be supervised. If feasible given space and staffing constraints, schools are encouraged to provide individual students with their own waiting room. If more than one student is in the same waiting room at a time, each student must be at least 6 feet apart (and should be spaced as far apart as possible) and wearing a surgical mask (non-N95 and non-cloth) while in the medical waiting room. If a student does not already have a surgical mask, the school should provide one. Schools must also be equipped with the PPE for the staff involved with supervision of the waiting room. Strict mask wearing covering the nose and mouth at all times for every person in the room must be enforced. Students can work on individual schoolwork or other activities while in the medical waiting room.
- Contact caregiver for pick-up.

IF CAREGIVER CAN PICK UP DURING THE DAY: Student waits to be picked up in the medical waiting room. Caregivers must wear a mask/face covering when picking up their student. Students should not ride the school bus to get home. Caregivers and students should wash their hands upon arriving at home and change their clothes as a precaution.

IF CAREGIVER CANNOT PICK UP DURING THE DAY: The student should wait in the medical waiting room until the end of the day to be picked up by caregiver. The student should not go home on a school bus with other students.

- Current Massachusetts DPH guidance is that all symptomatic individuals in Massachusetts, even those with mild symptoms, should be tested. An individual who does not wish to be tested may return to school 10 days from start of symptoms, as long as their symptoms have improved and they have been without fever for at least 24 hours prior to their return to school without the use of fever reducing medication.
- Student should get tested at one of Massachusetts's test sites. Sites may require pre-screening, a referral, and/or appointment.
- Isolate at home until test results are returned.
- Proceed as follows according to test results:
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IF NEGATIVE: Students may return to school after they have tested negative for COVID-19, have improvement in symptoms, and have been without fever for at least 24 hours without the use of fever reducing medications. If a provider makes an alternative diagnosis for the COVID-19-like symptoms, the individual may return to school based on the recommendations for that alternative diagnosis (e.g., influenza or strep pharyngitis).

IF POSITIVE: Student remain at home (except to get medical care), monitor their symptoms, notify the school, notify personal close contacts, assist the school in contact tracing efforts, and answer the call from local board of health or Massachusetts Community Tracing Collaborative. Most people who have relatively mild illness will need to stay in self-isolation for at least 10 days and until at least 3 days have passed with no fever and improvement in other symptoms. FOLLOW STEPS UNDER: "Protocol: Student or staff tests positive for COVID-19."

IF NO SYMPTOMS:

- If the evaluation shows the student does not have symptoms, send the student back to class.

Protocol: Staff is symptomatic at home

- Staff should monitor themselves at home each morning for the most common symptoms of COVID-19 (see list above: “Most common symptoms of COVID-19).

IF NO SYMPTOMS:

Come to work.

IF ANY SYMPTOM:

- Do not come to work.
- Contact the COVID-19 point of contact and/or other absence reporting mechanism established by the school.
- Current Massachusetts DPH guidance is that all symptomatic individuals in Massachusetts, even those with mild symptoms, should be tested. An individual who does not wish to be tested may return to school 10 days from start of symptoms, as long as their symptoms have improved and they have been without fever for at least 24 hours prior to their return to school without the use of fever reducing medication. The staff member should get tested at one of Massachusetts’ test sites. Sites may require pre-screening, a referral, and/or an appointment.
- Isolate at home until test results are returned.

Proceed as follows according to test results:

IF NEGATIVE: Staff member may return to school after they have tested negative for COVID-19, have improvement in symptoms, and have been without fever for at least 24 hours without the use of fever reducing medications. If a provider makes an alternative diagnosis for the COVID-19-like symptoms, the individual may return to school based on the recommendations for that alternative diagnosis (e.g., influenza or strep pharyngitis).

IF POSITIVE: Staff member should remain at home (except to get medical care), monitor their symptoms, notify the school, notify personal close contacts, assist the school in contact tracing efforts, and answer the call from local board of health or Massachusetts Community Tracing Collaborative. Most people who have relatively mild illness will need to stay in self-isolation for at least 10 days and until at least 3 days have passed with no fever and improvement in other symptoms. FOLLOW STEPS UNDER: “Protocol: Student/staff tests positive for COVID-19”.

Protocol: Staff is symptomatic at school

As noted above, staff should be encouraged not to come to school if they are experiencing any symptoms of COVID-19.

- If a staff member suspects any symptoms during the day, they should follow the school's protocols for getting another adult to cover their class mid-day, if needed, and see the school nurse (or school medical point of contact) to be evaluated for symptoms.
- **IF NO SYMPTOMS:** The staff member should follow the school's standard protocols for being excused due to illness.
- **IF ANY SYMPTOM:**
 - Current Massachusetts DPH guidance is that all symptomatic individuals in Massachusetts, even those with mild symptoms, should be tested. An individual who does not wish to be tested may return to school 10 days from start of symptoms, as long as their symptoms have improved and they have been without fever for at least 24 hours prior to their return to school without the use of fever reducing medication.
 - The staff member should get tested at one of Massachusetts's test sites. Sites may require pre-screening, a referral, and/or appointment.
 - Isolate at home until test results are returned.
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Proceed as follows according to test results:

- **IF NEGATIVE:** Staff member may return to school after they have tested negative for COVID-19, have improvement in symptoms, and have been without fever for at least 24 hours without the use of fever reducing medications. If a provider makes an alternative diagnosis for the COVID-19-like symptoms, the individual may return to school based on the recommendations for that alternative diagnosis (e.g., influenza or strep pharyngitis).
- **IF POSITIVE:** Staff member should remain at home (except to get medical care), monitor their symptoms, notify the school, notify personal close contacts, assist the school in contact tracing efforts, and answer the call from local board of health or Massachusetts Community Tracing Collaborative. Most people who have relatively mild illness will need to stay in self-isolation for at least 10 days and until at least 3 days have passed with no fever and improvement in other symptoms. FOLLOW STEPS UNDER: "Protocol: Student/staff tests positive for COVID-19".

Protocol: Presence of multiple cases in the school or district

- If there is more than one confirmed COVID-19 case (students or staff) in the school at one time, or if there is a series of single cases in a short time span, we will work with the local board of health to determine if it is likely that there is transmission happening in school.
- When there is suspected in-school transmission beyond one cohort or a small number of cohorts, we will consult with the local board of health as to proposed next steps. These steps should include a review of the specific COVID-19 public health metrics for the municipality and could lead to, for example, making a decision to
 - a) close part of the school or the entire school for a short time (e.g. 1-3 days) for an extensive cleaning or other facility mitigation
 - b) close the school partially or fully for the longer duration of a 14-day quarantine period.

If the decision is made to close for some number of days, we will send clear information and instructions to families and staff:

- Informing them that it is possible COVID-19 is being transmitted in the school and/or district
- Noting that there may be more potential cases that are not yet symptomatic
- Recommending students quarantine and not have contact with others
- Reminding families of the importance of not having contact with higher-risk individuals (e.g., grandparents)
- Reminding families of the list of COVID-19 symptoms for which to monitor
- Ensuring that remote learning is immediately provided to all students

Before bringing students back to school:

- Check inventory levels of needed supplies (e.g., disposable masks, soap, hand sanitizer, cleaning products); re-order replacement inventory
- Consider a school-wide refresher training on the importance of correct hygiene procedures (masks, physical distance, handwashing)
- Reiterate the critical nature of masks,