



Protocol Name:	Attendance Tracking and Contact Tracing			Number:	PHN 0003-2020
Applies to:	All NHPS Staff, Public Health Nurses				
Contact Person:	Erik Patchkofsky, Director of Physical Education, Health, Athletics Dr. Jennifer Vazquez, Director of Public Health Nursing Dr. Paul Whyte, Assistant Superintendent for Instructional Leadership				
Effective Date:	July 1, 2020	Last Reviewed:	February 8, 2021		
Authorized By:	Maritza Bond, Director of Health	Executed By:	Board Educa	of Health, Bo tion	ard of

### **Objectives**:

- Provide quarantine and isolation instructions to BOE positive cases and all contacts; conduct interviews with BOE staff and students within the district.
- Monitor daily attendance of BOE students within the district

### **Attendance Tracking:**

- Attendance will be taken daily.
- Parents are asked to follow attendance protocols by calling the school to notify them of their child's absence and symptoms present.
- Parents and staff members should be aware of travel advisories in place and requirements for self-isolation upon return from any affected areas.

### **Contact Tracing:**

There are three components of exposure – intensity, frequency, and duration. In general, more intense, more frequent, and/or longer duration exposures have the potential to cause more harm. In the case of COVID-19, the risk of illness can be reduced through interventions that reduce any or all of these **three (3) characteristics**: What factors determine risk? While exposure is largely a function of intensity, frequency, and duration, risk is determined by many additional factors. Most importantly, personal risk is dependent on individual susceptibility. For example, this may be a function of age, gender, pre-existing conditions, or genetics. For these reasons, two people with the same exposure may have very different risk. Discussions of risk can also be subjective; in that they depend on personal risk tolerance. Last, risk is a function of factors outside of the individual, including the local healthcare capacity, the efficacy of available treatments, and the extent of spread in the underlying community. Two people with the same exposure may have very different risk. Intensity of exposure to SARS-CoV-2 may be minimized by physical distancing because the amount of SARS-CoV-2 in the environment around an infectious person is highest closest to the infectious person. Additionally, infectious people following respiratory etiquette (i.e., cover nose/





mouth when coughing or sneezing) and wearing masks reduces exposure intensity to people nearby. Frequency of exposure to SARS-CoV-2 may be minimized by reducing how often someone is in close contact with individuals outside the home who may be infectious. Duration of exposure to SARS-CoV-2 may be minimized by spending less overall time inside in close contact with others.

Contact tracing is the process used to identify those who have come into contact with people who have tested positive for many contagious diseases, including COVID-19. It is a long-standing practice and is an integral function of local health departments. All school district administrators, school safety specialists, counselors, and any other staff deemed appropriate by the school district, should be provided with information regarding the role of contact tracing in keeping school communities safe from the spread of contagious disease. School districts should collaborate with the local health department and engage their school nurses to develop contact tracing policies and procedures, as well as educate the broader school community on the importance of contact tracing.

- If any individual in the school community (student or staff), tests positive for COVID-19, the school nurse, in collaboration with school administrators, will collaborate with NHPS Leadership and the New Haven Health Department to conduct contact tracing and to determine the quarantining of individuals as necessary.
- Contact tracing will be documented in VEOCI contact tracing system used by the New Haven Health Department.
- Families and staff will be notified of positive cases in the school community while protecting the identity of any impacted individual.
- The New Haven Health Department and Superintendent of Schools will collaborate on any necessary school closures.
- Connecticut Department of Public Health criteria for determining temporary or prolonged school closures will be followed.

The following guidelines will be enacted as needed following discussion of the case with the New Haven Health Department. Addendum 5 from the Connecticut State Department of Education should be used to guide all advice.

- The classroom and associated common areas shall be cleaned and disinfected in accordance with the most current CDC guidelines relating to COVID-19 affected areas.
- For contact tracing purposes, a **48-hour lookback** prior to the onset of symptoms will be utilized to identify potential close contacts.
  - This lookback may include those who shared transportation and other spaces, which will in turn may require others to be quarantined. This will be discussed during contact tracing.
- Other scenarios are also possible. It is important the school nurse, school administrators, NHPS Central Office staff and New Haven Health Department staff work together to identify potential or confirmed cases and follow recommended actions in response.





### Workflow for reported cases:

### 1. CASE REPORTING

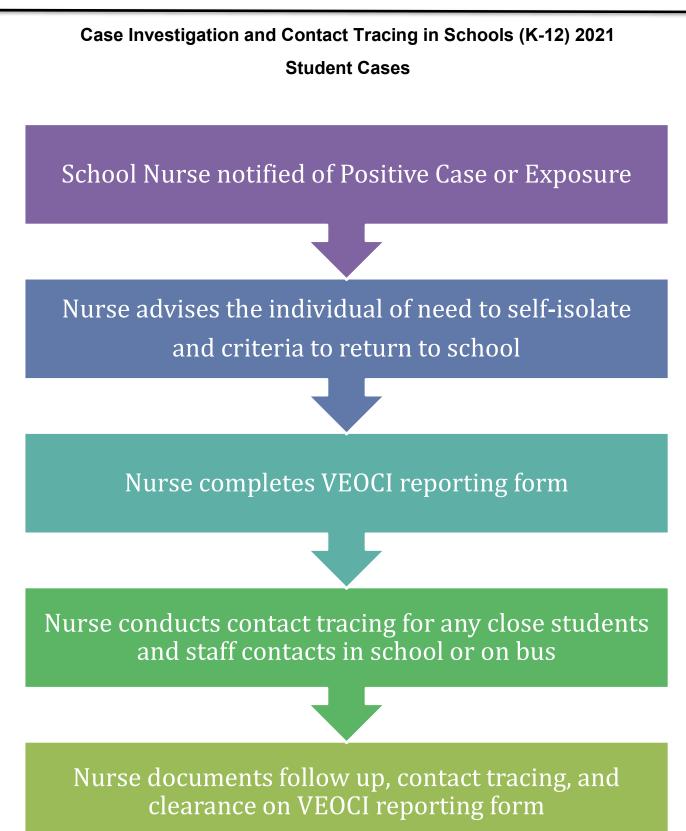
- a. **STAFF CASES** The **Principal will complete the VEOCI school case** reporting form for situations where a staff member had an exposure to an individual with COVID-19 or an individual is confirmed to have COVID-19.
  - i. Administrators must request proof of positive test result.
  - ii. These results (screen shot, faxed copy of lab result, etc.) can be attached to the VEOCI report.
- b. **STUDENT CASES** The Nurse at the assigned school will complete the VEOCI school case reporting form for situations where a student had an exposure to an individual with COVID-19 or an individual is confirmed to have COVID-19.
  - i. The Nurse **must request proof** of a positive test result.
  - ii. These results (screen shot, faxed copy of lab result, etc.) can be attached to the VEOCI report.
- c. If test results are pending, but COVID-19 is suspected, the case can be reported, but contact tracing will not take place until the result is a confirmed positive result.
- d. After completing the VEOCI report, **administrators should call Mr.** Erik Patchkofsky at **a second of** or Dr. Paul Whyte (in Erik's absence) at **a second of** for guidance/immediate recommendations.

### 2. CASE ASSIGNMENT

- a. **Staff cases** Erik Patchkofsky will assign contact tracing of staff cases to a School Health Assistant ("SHA"). The contact tracing of cases will take place during the hours of **9am 5pm**.
- b. Cases reported outside of 9am 5pm., should be reported to their administrator. The administrator will contact Mr. Patchkofsky (or Dr. Whyte in Mr. Patchkofsky's absence) and he will use the decision tree in <u>Addendum 5</u> (enclosed) to make a provisional decision. Each case will be verified the following business day.
- c. Student cases the Nurse is responsible for all follow up and documentation on student reports. Nurses can reach out to the Director of Nursing for guidance.
- d. Mr. Patchkofsky will notify the assigned SHA of their case assignment.
- e. NHHD staff will review cases for further recommendations after contact tracing is conducted.
- f. Staff who are quarantined or isolated will be given a written communication explaining the need to isolate/quarantine. Staff will return to work on the 11<sup>th</sup> day following their isolation/quarantine, provided they are negative/asymptomatic. No further clearance will be required.
  - f. Students required to quarantine or isolate will be cleared by the Nurse in accordance with **Addendum 5**.



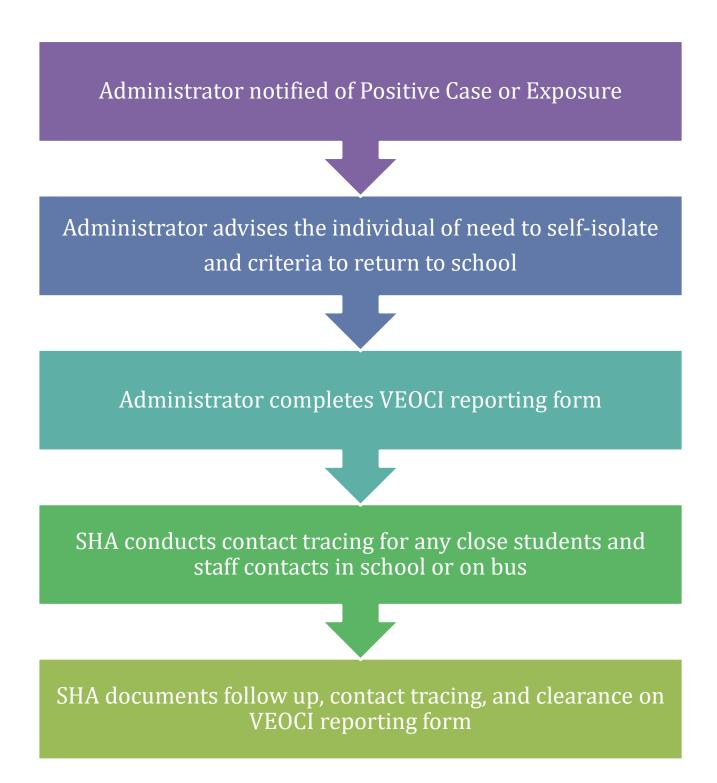








## Case Investigation and Contact Tracing in Schools (K-12) 2021 Staff Cases







# Addendum 5

Adapt, Advance, Achieve: Connecticut's Plan to Learn and Grow Together

Connecticut State Department of Education

# Interim Guidance for Responding to COVID-19 Scenarios in Connecticut School Districts

August 6, 2020 (Updated January 4, 2021)

connecticut Department of Public Health

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The Connecticut State Department of Education (CSDE) and State Department of Public Health (DPH) have collaborated to provide school districts with guidance and protocols for responding to specific COVID-19 scenarios that may occur during the 2020–21 school year. This guidance complements the Containment Plan (p. 23) requirement of Adapt, Advance, Achieve: Connecticut's Plan to Learn and Grow Together, which instructs school districts to develop written protocols for containment and immediate response related to symptoms of, diagnosis of, or exposure to the virus. Guidance from the Centers for Disease Control and Prevention (CDC) informs the specific scenarios and actions that follow. CDC guidance and public health data are evolving and therefore, this guidance may be updated accordingly.

This document addresses issues when a student or staff person has or develops: possible signs and symptoms of COVID-19; a diagnosis of COVID-19; or exposure to a person diagnosed with COVID-19. It describes immediate actions for removing an individual from the school setting and when to safely return them to school. School district leaders are encouraged to use this as a guide, in consultation with public health experts, including school nurses, school medical advisors, local health directors and in consideration of all specific circumstances on a case-by-case basis.

While this guidance is representative of acceptable public health practices for limiting the spread of COVID-19 in schools based on the current CDC and CT DPH recommendations in place, school districts should consider local variables when choosing the approach to implementation, including but not limited to health and safety, equity and access, the school district's specific administrative needs, input from local public health, and consultation with legal counsel.





## Addendum 5: Interim Guidance for Responding to COVID-19 Scenarios in Connecticut School Districts

Event	Location of Event	Testing Result PCR or antigen tests can be accepted <sup>a</sup>	Isolation/Quarantine Isolation = when you are experiencing symptoms or have a confirmed diagnosis of COVID-19 Quarantine = when you have been exposed but you are not experiencing symptoms
Individual has COVID-19 symptoms <sup>1</sup> but has NOT had close contact <sup>2</sup> to a person diagnosed with COVID-19	If at home: stay home, notify the school immediately (do not wait until the beginning of the next school day), and get tested. If at school: students should remain masked, adhere to strict physical distancing, be assessed by the school nurse or school medical advisor (if available), stay in the isolation room (with adult supervision), until picked up to go home, consult a healthcare provider, and get tested. If symptoms arise on the bus, students should remain masked and follow the remaining measures listed above upon arrival to school. They must not be sent home on the bus. If at school: staff members should remain masked, adhere to strict physical distancing, immediately contact leadership (per district protocols), go home, consult a health-care provider, and get tested.	Individual tests <sup>3</sup> negative	Return to school once there are no symptoms for 24 hours.
		Individual tests <b>positive</b>	Remain home (except to get medical care), monitor symptoms, notify the school immedi- ately, notify personal close contacts, assist the school in contact tracing efforts <sup>4</sup> , and answer phone calls from public health officials/contact tracing staff. Stay in self-isolation <sup>5</sup> for at least 10 days since the onset of symptoms and until at least 24 hours have passed with no fever <sup>6</sup> (without
		Individual is not tested or test results not yet available	fever-reducing medications) and with improve- ment in other COVID-19 symptoms. Presume COVID-19. Stay in self-isolation for at least 10 days since the onset of symptoms <u>and</u> until at least 24 hours have passed with no fever (without fever-reducing medications) and with improvement in other symptoms. Can return to school earlier if obtains note from healthcare provider with a specific, confirmed alternate diagnosis.





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Individual has COVID-19 symptoms <sup>1</sup> AND had close contact <sup>2</sup> to a person diagnosed with COVID-19	If at home: stay home, notify the school immediately (do not wait until the beginning of the next school day), and get tested. If at school: students should remain masked, adhere to strict physical distancing, be assessed by the school nurse or school medical advisor (if available), stay in the isolation room (with adult supervision), until picked up to go home, consult a healthcare provider, and get tested. If symptoms arise on the bus, students should remain masked and follow the remaining measures listed above upon arrival to school. They must not be sent home on the bus. If at school: staff members should remain masked, adhere to strict physical distancing, immediately contact leadership (per district protocols), go home, consult a healthcare provider, and get tested.	Individual tests <b>negative</b>	Stay in self-isolation for at least 10 days since the onset of symptoms and until at least 24 hours have passed with no fever (without fever- reducing medications) and with improvement in other symptoms.
		Individual tests <b>positive</b>	Remain home (except to get medical care), monitor symptoms, notify the school, notify personal close contacts, assist public health and the school in contact tracing efforts. Stay in self-isolation for at least 10 days since the onset of symptoms and until at least 24 hours have passed with no fever (without fever- reducing medications) and with improvement in other symptoms.
		Individual is not tested or test results not yet available	Presume COVID-19. Stay in self-isolation for at least 10 days since the onset of symptoms and until at least 24 hours have passed with no fever (without fever-reducing medications) and with improvement in other symptoms.





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have COVID-19 symptoms BUT had close contact2school imm until the be school day)to someone diagnosed with COVID-19If at school remain mas physical dis by the schoo medical add picked up to a health can tested. Study symptoms in health room up, they do the isolation be sent horIf at schoolIf at school 	If at home: stay home, notify the school immediately (do not wait until the beginning of the next school day), and get tested. If at school: students should remain masked, adhere to strict physical distancing, be assessed by the school nurse or school medical advisor (if available), be	Individual tests negative (If utilizing test to shorten quarantine period, ensure testing sample taken no earlier than 5 days after last exposure consistent with <u>CT DPH Interim</u> <u>Recommendations.</u> 7)	Remain home in self-quarantine <sup>7</sup> for the recom- mended 10 days from last exposure to the per- son diagnosed with COVID-19 consistent with school district policy. If school district policy allows for exit from quarantine after 7 days with a documented negative test result, exit quaran- tine but continue daily symptom monitoring for an additional 7 days (days 8–14). For any length quarantine, if any symptoms de-
	picked up to go home, consult a health care provider, and get tested. Students who do not have symptoms may remain in the health room until they are picked up, they do not have to be sent to the isolation room. They must not be sent home on the bus. If at school: staff members should		velop, immediately self-isolate and contact the local public health department and healthcare provider. Increase attentiveness to mitigating actions. <sup>7</sup>
		Individual tests <b>positive</b>	Remain home (except to get medical care), monitor symptoms, notify the school, notify personal close contacts, assist public health and the school in contact tracing efforts.
	remain masked, adhere to strict physical distancing, immediately contact leadership (per district		Stay home until 10 days have passed since date of the positive COVID-19 test or if symptoms occur, 10 days since symptoms began.
	protocols), go home, consult a healthcare provider, and get tested.	Individual is not tested	Remain home in self-quarantine for 10 days from last exposure to the person diagnosed with COVID-19. Continue daily symptom mon- itoring for an additional 4 days (days 11–14). If any symptoms develop, immediately self-iso- late and contact the local public health depart- ment and healthcare provider.
			Increase attentiveness to mitigating actions.7





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### Addendum 5: Interim Guidance for Responding to COVID-19 Scenarios in Connecticut School Districts

#### End notes

- 1 Key COVID-19 signs and symptoms are: feeling feverish, measured temp 100.4 F or more, chills, uncontrolled new cough, shortness of breath, difficulty breathing, loss of taste or smell. There are other more nonspecific signs and symptoms. For a full list, see CDC web page at <u>https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html</u>
- 2 Close contact: Spending a total of at least 15 minutes (within 24 hours) within 6 feet of a person with confirmed COVID-19, or a direct exposure to possibly infected droplets of saliva or nasal mucus (e.g., being sneezed or coughed on in the face). See CDC web page at <a href="https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html">https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html</a>
- 3 COVID-19 test for school/work attendance: This is a viral test, NOT an antibody test. Tests for the presence of the virus must be used. Antibody tests, which test for the individual's immune system reaction to a past viral infection should not be used to determine school attendance (see CDC information on COVID-19 tests at <a href="https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/testing.html">https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/testing.html</a>). This can include a molecular test (often called a PCR test) or an antigen test. A negative antigen test in a person with symptoms consistent with COVID-19 or a close contact without symptoms should be followed up with a PCR test. Find DPH guidance on the use of antigen tests here: <a href="https://portal.ct.gov/DPH/HAI/COVID-19-Healthcare-Guidance">https://portal.ct.gov/DPH/HAI/COVID-19-Healthcare-Guidance</a>.
- 4 Contact tracing: A public health intervention in which the contacts of a person with a communicable disease are identified, and possibly tested, quarantined or isolated to interrupt the transmission of the virus in a population. <u>https://portal.ct.gov/Coronavirus/ContaCT</u>
- 5 Self-Isolation: Individual with signs or symptoms of COVID-19, or a positive test, stays home until no longer infectious for at least 10 days since the onset of symptoms and until at least 24 hours have passed with no fever (without fever-reducing medications) and with improvement in other COVID-19 symptoms. See CDC web page at https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/isolation.html
- 6 Fever: Measured temperature of 100.4 F or higher
- 7 Self-Quarantine: Individual identified as a close contact without symptoms stays home for 10 days since last exposure to someone who was diagnosed with COVID-19. Continue daily symptom monitoring for an additional 4 days (day 11–14). When diagnostic testing resources are sufficient and available, a quarantine period of 7 days with a negative test result, consistent with <u>CT DPH Interim Recommendations</u>, is also acceptable; continue daily symptom monitoring for an additional 7 days (day 8–14). If any symptoms develop, immediately self-isolate and contact the local public health authority and healthcare provider.

For individuals returning from self-quarantine, for the balance of the 14-day period after exposure, school districts should: (1) ensure adherence to mitigating actions including strict supervision of mask wearing and social distancing; (2) restrict students from participating in athletics or other group extracurricular activities (for the full 14 days); and (3) consider limiting educator and staff duties that require sustained and close contact with other individuals (within 6 feet for 15 minutes or more within 24 hours). See <u>CT DPH Interim Guidance on the Length of Quarantine for Contacts of Persons with SARS-CoV-2 Infection.</u>