School Health Advisory Board Agenda for 2/17/2021

Present:  Rebecca Abernathy, Lori Balaban, Gemilia Bouber, Elizabeth Horton, Kristy Davis, Christine Eagleson, Eileen Gomez, Leanne Knox, Mark Niehaus, Christina Pitsenberger, Jennifer Schaeffer, Chris Siebert, Kevin Kirst

Motion to approve minutes – minutes from 9/23/2021 approved

Division Updates – ACPS moving to Stage 4 on March 15

Vaccination of Teachers – exclusion for illness symptoms after vaccine
Because side effects of the currently available COVID vaccines are common, certain illness symptoms within 3 days of vaccination may not be an indication for a COVID evaluation and would not be a contraindication for employees to return. This would be a change from the current entrance screening procedure. The type of leave an employee would take if staying home due to vaccine side effects needs to be determined by HR. There was consensus approval of the chart below. Anyone with a fever, vomiting or diarrhea should stay home irrespective of vaccination.

<table>
<thead>
<tr>
<th>Signs and Symptoms</th>
<th>1-3 days</th>
<th>&gt;3 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soreness at site of injection</td>
<td>May work</td>
<td>Contact HCP</td>
</tr>
<tr>
<td>More likely to be side effects: fatigue, headache, muscle or joint pain, chills</td>
<td>May work if feel well enough or stay home until resolved</td>
<td>Refer for medical eval or testing</td>
</tr>
<tr>
<td>May be side effects: fever or vomiting</td>
<td>Stay home until resolved</td>
<td>Refer for medical eval or testing</td>
</tr>
<tr>
<td>Unlikely to be side effect: cough, shortness of breath, nasal or chest congestion, sore throat, loss of taste or smell</td>
<td>Stay home; refer for medical eval and/or testing</td>
<td>May return to work/school when cleared by HCP, test negative or after 10 days</td>
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COVID vaccines cannot be mandatory since they have only been approved under an emergency use authorization by the FDA.

Metrics: With the exception of the spike in positive cases among UVa students, the overall local pandemic metrics have improved including case incidence, percent positivity, hospitalizations and patients seeking medical evaluation for COVID symptoms. At pediatric associates, 95% of patients who test positive have a known COVID exposure. Transmission in UVa students has been associated with social rather than classroom behavior.

Newly released CDC Guidance for Schools
COVID testing – new guidelines recommend schools consider school-based testing

1) **For symptoms or exposure:** ACPS offers testing for employees through a contractor (BrightStar Care) three afternoons a week at the Jessup House on Market Street. The location was arranged by the City of Charlottesville with whom ACPS partnered for this purpose.

   Testing has become much more available community-wide and testing sites include:
   a) [Community testing events](https://www.letsgetchecked.com/us/en/home) offered by the health department
   b) Med Express – can be hit or miss, better to seek testing in the morning because they sometimes run out of tests
   c) UVa COVID clinic – requires referral
   d) UVa Riverside
   e) Some medical practices including Pediatric Associates

   **Barriers to testing for some families:**
   a) Lack of transportation
   b) Lack of primary care physician

   **Proposed solutions:**
   c) Arrange for UVA COVID clinic to accept referrals from schools
   d) Develop resource guide for families and post on ACPS website
   e) Consider using BrightStar Care for student testing
   f) Seek or arrange for mobile testing clinic
   g) Consider using ACPS transportation resources to get students and parents to testing sites
   h) At home tests – may be difficult for some people to administer, may not be associated with correct family member

2) **Screening or prevalence testing** Consensus opinion – Do not recommend school-based screening or prevalence testing

   a) Not practical – number of screening tests necessary for true prevalence testing would be unwieldy (testing all employees and students once per week would entail 3,800 tests per day)
   b) Testing would require full PPE for employee collecting sample with proper and lengthy donning and doffing protocol and two employees
   c) Would generate aerosols – need to have dedicated space solely for this purpose
   d) Expense – need prescriber and coordination with lab
   e) Pooled testing not recommended at current community levels
   f) Notification protocol
   g) Need buy-in and consent from employees and families – cannot make mandatory
   h) Self-collection may be possible for adults and older students – recent evidence published that sensitivity difference with HCP collected specimen insignificant
   i) At-home testing kits require a number of steps that might be challenging for some people


**Masks**

- Fit more important than material
- Make masks available for students whose masks are ill-fitting, become wet or soiled
- Create culture where it is acceptable to remind staff and students about consistent and correct mask use
- Recommend education effort around better mask fitting:
a) See [UVa video](https://news.virginia.edu/video/doing-our-part-mask-update-spring-semester)
b) [CDC resources](#) – consider displacing posters in schools
c) Consider involving students in correct and consistent mask use via poster contest, videos etc.

**Quarantine** – new CDC guidance on abbreviated quarantine does not apply to school

a) Travel recommend sharing this guidance as recommendation rather than requirement
b) After vaccine - *A person who has received both doses of the COVID vaccine will not have to quarantine if exposed to COVID from 2 weeks after receiving the vaccine through 90 days after receiving it* – the long-term immunity conferred by the vaccine has not yet been demonstrated, but will be once a sizable cohort of vaccinated individuals exceeds 90 days

c) Consider involving students in correct and consistent mask use via poster contest, videos etc.

**Student bathroom use in Stage 4**

a) Establish and post capacity limit equal to the number of receptacles, and have floor markings for adequately spaced wait areas outside of bathroom
b) Students should keep mask on in bathrooms
c) Consider allowing students to use bathrooms during switching of classes, especially if switches are staggered, since some students may not want to miss class to use the bathroom and no students should have bathroom use restricted

**Lunch in Stage 4**

a) Talking restrictions while eating: students currently attending school are not contracting COVID frequently suggesting current practice of students eating in their classroom is safe, but younger child have been demonstrated to have a lower viral load. Restricting conversation during lunch may be considered for older students although silent lunch is discouraged. Suggest playing music or a podcast during lunch then allowing a 10 minute or so masked conversation period.
b) Encourage eating outdoors, but require 6 foot spacing between individuals
c) Remind employees to not eat lunch together unless adequate distance can be maintained; if space in the building is an issue, suggest employees eat in their cars.

**Mental Health of Students and Staff**

Health care providers report an increase in anxiety and depression in school-aged children. Kevin reported that ACPS secured a grant to increase mental health resources and is in the process of hiring a coordinator to work with community partners to leverage mental health resources to increase mental health support in schools.

- The mental health of student and staff will be a priority
- Consider universal mental health screening for all students
- Training in mental health first aid
- Continue mental health support measures for employees

**Announcements** – Upcoming meetings

March 17
April 14
May 12