

2. Health Education and Communication

Team Leader(s): Peter LaDuca

Task Force Members: Bridgett Burroughs, James Clark, Allan Wakefield, Robert Hodge, Mary Powell

Considerations	Plan 1 – Return to School	Plan 2 – Blended & Remote
Communicate to students, staff, parents and community members: <ul style="list-style-type: none"> - The importance of social distancing, monitoring symptoms of COVID-19 and when to stay home - Hand hygiene, respiratory etiquette, mask-wearing procedures - School re-entry protocols - Mental health resources - Vaccine concerns/requirements - Updates to school policies 		
Develop a protocol for communicating with families around COVID-19 cases or potential cases. Have sample messages/letters for COVID-19 prepared for various school audiences (e.g., staff, families)		
Provide training for staff and students on wearing, putting on and removing PPE. Send fact sheets home with students that provide similar education for parents		
Develop and provide training for faculty/staff on how to address close contact interactions with students as part of everyday job tasks		
Consider how to introduce substitutes (teachers, food service, transportation) to school policies surrounding health and safety		
Prepare for impact of COVID-19 and flu season		

Meeting Minutes
2. Health Education and Communication
June 9, 2020 2:00 p.m.

Attendees: James Clark, Allan Wakefield, Robert Hodge, Peter LaDuca, Bridgett Burroughs, Thurston O'Neal, Donna Raphael, Erica Deans

James Clark opened the meeting with the topic of discussion on how we can open our schools while best ensuring the health and safety of our staff and students. (It was announced today that possible face-to-face learning could begin this summer for our Special Ed students). How do we educate people on this process?

PL: Put up a lot of signage. I will share what they have distributed at BOCES. A company called Global Compliance just put out three training modules that we can access. He suggests we make it mandatory viewing just like the sexual harassment education. You should maximize the website. Make a separate section just for COVID updates

BB: I recently attended a session just for health staff. Do we have any training for lay people so our staff is prepared when we return? When is the Global Compliance training available? Now. Will we have access? Yes

JC: Is the training remote?

BB: Yes. District should be trained by summer. They should take the training and if they have any questions call the building nurse.

JC: Visuals very important!! Has anything changed as far as vaccines go? The governor says that they need certain vaccines to return to school.

BB: Nothing has changed except the timing of the TDAP and the Menatru (sp?). They will be administered at a different age. All else stays the same.

JC: To the community agencies: What type of communication do you have with the community?

DR: We will definitely have an open line of communication with the community. We have been sharing information via email, mainly. Hands Across Hempstead has been doing a lot with the community. We will do whatever the district likes to help get the word out. Texting, FaceTime, video platforms. I have attended many meetings with information sharing

JC: When we get information from the state or the CDC such as handwashing procedures, printable or videos, we would like to keep the entire community on the same page. We would like you to be able to help us get the word out to keep the consistency so we are all following the same protocol

PL: The parents must be involved

DR: PTA's can be included in getting the info out as well. All avenues should be involved.

BB: I don't know who Donna is. Can you please introduce yourself?

DR: I am the Senior Director of Family and Children's Association as well as part of the CET. We run over 30 programs including Hands Across Hempstead. We are located at 31 Main Street in Hempstead

BB: The biggest way to keep everyone up to date is to get the parents much more involved. They usually do better when they hear it from a "peer" parent

DR: We work closely with the parents so we can share info more readily

JC: Training and education are most important. Love the "peer" parent concept. Can the others please introduce themselves as well?

ED: Nassau Probation/Juvenile Detention Center

TO: Director of the Hempstead Prevention Coalition. We have over thirty organizations represented by the coalition. It includes the police, lawyers, schools, mental health agencies, etc.

JC: How do we provide training for students and staff for proper use of PPE? What type of PPE will we need for the students?

PL: Still questionable. Will students keep masks on? How do you enforce it? What about cost? We need to focus on staff – nurses, facilities. I don't know if the school will supply masks for staff. They should probably bring their own

JC: What is the district policy on masks?

PL: As of now you must wear a mask if you cannot maintain 6' of social distancing. I don't wear a face covering I am in my own office, but I do wear one when I go into the hallway. You must keep the 6' distance

BB: A lot of districts have ordered masks for their staff. One per day. Children should wear cloth masks that should be laundered daily. There was talk at my meeting about getting kiosks to screen multiple people at once. It is not a mandate to wear masks at this time, only a suggestion. Most districts are not buying for students

JC: How are HPC meetings being conducted during this pandemic?

TO: We follow closely what the CDC and Gov. Cuomo say. We are very strict. We are required to wear a mask in shared spaces. When we go back to in-person meetings we will follow best practices

DR: We will have strict practices as well. We have already been putting protocols in place. Our two stall bathrooms have been changed to one stall. Meetings will continue with ZOOM, etc. for a while. There are actually a lot of benefits to remote meetings. It has a low impact on the environment.

TO: Even when live meetings resume, we will have the option to join in ZOOM

ED: We have a different circumstance and we have all been in the office the whole time. There is no in-person court session. We have been doing via phone or Skype. We do not allow visitors to the office. We are in close quarters. We are required to wear a face mask. When we are around kids or staff we must have a mask on. We have an intake sheet and we take temperatures before

anyone enters the building. Children are quarantined from other children for 7 days before they can mainstream

JC: Are they being tested while they are there?

ED: No. Doctors came a few weeks ago but we have not gotten the results. There is a question as to how they will bill us. Thankfully none of the children have gotten sick, only staff.

JC: Spacing is an issue for all our buildings

ED: It is impossible to social distance at Juvenile Detention. We also had an unusually high numbers of children last month

JC: We are trying to figure it out as well. We have to prepare for COVID and flu season together

PL: We don't know what is going to happen. Worst case, bad flu season and the return of COVID. We should be better prepared to deal with it now, physical spacing, online education

BB: We don't have enough information yet on how to prepare to come back to school. Nothing is concrete at this point. We need to come up with a plan. Has anything been decided about how to do temperature taking?

PL: Bigger question is whether to do it at all. We may have just a questionnaire. You could have COVID and no temp, or a temp and no COVID, especially during the summer months after being outside. Then, what do you do if someone has a fever? There are union issues. Still a lot of questions

ED: We can't just send them to the hospital

JC: Remember, you have to go out for 14 days at least. Do we notify health department and close down for 48 hours?

BB: Some schools have already opted not to take temperatures. Some are doing it. Should adults take their own temperature? We have to come up with a plan that ends somewhere

AW: Districts are not making their decisions now. When will these decisions be made? Who makes the decision – the Superintendent or the Board? When is the due date – July 1st or September 1st?

BB: We have to make decisions now. Everything will be backordered. We need more training on Hand Sanitizer. We should enforce hand washing first, hand sanitizer if that is not available. Policy would have to be issued to parents. We need a script from school physician. Decisions must be made.

JC to TO: Are you taking temps at HPC?

TO: Yes. Everyone entering the building has their temperature taken. All staff must sign in – contact tracing. We have empowered our directors to send people home. Schools don't have that luxury

DR: Now we take our own temps. All other buildings have non-contact thermometers. We must answer a questionnaire when we come in. In two weeks all staff will have to take temperature

BB: How many people are in your office?

DR: It varies. We never schedule everyone in on the same day

JC: Need procedures and policies in place. We need guidance from the Governor and the CDC. Things are changing very rapidly. We also have to prepare for teachers not wanting to come back in the building. Do community agencies have the right to know if any of our students have COVID?

PL: The agencies have responsibility for contact tracing. Onus should be put on the agencies to disclose any COVID cases. We have to be very mindful of how we handle the youth. You should probably have a scanner. If someone does not want to be in your building, virtual can still be good and effective. You have

to think of what things can be done virtually. If you go back in September, you have to be cautious and mindful of safety

BB: We have students with compromised immune systems. They cannot come to school. They will need to be home. We need to keep a list of who is in the building for contact tracing

JC: As far as instructional goes, we can do a lot more for the children remotely. It is a way of offering instruction without having to enter the home.

JC: We got through all the points of the meeting. Thank you for your input and time. The sooner we hear from the state, the sooner we can put a plan in place. A decision has to be made. It is going to be very expensive to do all this. With everything CDC wants it seems impossible to come back in September