Screening and Monitoring Guidelines for Staff and Students

A. Daily Screening: All BICO staff, students, parents/guardians, and any individuals seeking entry into the program spaces must be directed to self-screen at home, prior to coming to the program each day.

(a) Self-screening shall include checking temperature (temperature of 100.0°F or above is considered a fever), and checking for symptoms including fever, cough, shortness of breath, gastrointestinal symptoms, abdominal pain, unexplained rash, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold/flu. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.

(b) Parents and staff must sign written attestations regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given students medicine to lower a fever.

(c) Individuals who decline to complete the screening questionnaire will not be permitted to enter the program space.

B. Regular Monitoring: Staff must actively monitor students throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Students who appear ill or are exhibiting signs of illness must be referred to the nurse and be separated from the larger group and isolated until able to leave the facility. Program nurses have non-contact thermometers on site to check temperatures if a student is suspected of having a fever (temperature above 100°F).

"If any student or staff appears to have severe symptoms, the program nurse must call emergency services immediately. Before transferring to a medical facility, the nurse must notify the transfer team and medical facility if the individual is suspected to have COVID-19. Severe symptoms include the following: extreme difficulty breathing
(i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won't stop.

Isolation and Discharge of Ill Students and Staff

A. Planning for Isolation and Discharge: Programs must take the following actions to prepare for a potential exposure.

(1) Designate a separate space to isolate students or staff who may become ill, with the door closed (or a solid barrier) if possible. The designated space cannot be the nursing office. Isolated students must be supervised by a staff member at all times. A private or separate bathroom should be made available for use by sick individuals only. Others must not enter an isolation room/space without PPE appropriate to the care setting. A location with an open window and/or good air circulation is optimal.

(2) If your facility does not have designated isolation rooms/spaces, determine a pre-specified location/facility to which you will be sending students presenting with COVID-19 symptoms.

(3) Programs must have an emergency back-up plan for staff coverage in case a student or staff becomes ill.

(4) The designated BICO COVID19 point person will notify the local Board of Health and follow the Public Health Recommendations for Community-Related Exposure.

(5) Programs must have masks and other cloth face coverings available for use by students and staff who become symptomatic, until they have left the program building.

B. If a Student Becomes Symptomatic: If a student becomes symptomatic, programs must follow the protocols below:

(1) Immediately isolate from other students and minimize exposure to staff.

(2) Whenever possible, cover the student’s nose and mouth with a mask or cloth face covering and accompany the student to the designated isolation room.

(3) A staff member must alert the program nurse. The nurse will then properly assess the student in the isolation room to determine if the student should remain in the isolation room with a staff member until a parent or guardian arrives for pickup.

(3) Contact the student’s parents and send home as soon as possible.
(4) Follow the program’s plan for the transportation of a student who has developed symptoms and who relies on program transportation.

(5) If the nurse determines the student is experiencing severe symptoms and is in need of emergency care, the nurse will immediately call 911 and remain with the student until EMS arrives.

(6) Custodial staff should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. During this waiting period, open outside doors and windows to increase air circulation in these areas. Custodial staff should follow the CDC cleaning and disinfection recommendations for cleaning the exposed locations.

C. If a Staff Becomes Symptomatic: If a staff member becomes symptomatic, they must cease duties immediately and be isolated from others until they can safely leave the building. Staff must regularly self-monitor during the day to screen for new symptoms. If new symptoms are detected among a staff member, follow the requirements above on how to handle symptomatic individuals.

D. If a Student or Staff Contracts COVID-19: Sick students or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 must not return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. Program leaders will determine the date of symptom onset for the student/staff. Program leaders will identify if the student/staff attended/worked at the program while symptomatic or during the two days before symptoms began and also determine who had close contact with the student/staff at the program during those days (staff and other children).

(1) If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 14 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 15.

E. Notifying Required Parties: In the event that a program experiences an exposure, BICO programs must notify the following parties.

(1) Staff members and families about exposure while maintaining strict confidentiality.
(2) Local board of health if a student or staff is COVID-19 positive (the BICO COVID19 point person will notify the local BOH while adhering to the Public Health Recommendations for Community-Related Exposure).

F. Self-Isolating Following Exposure or Potential Exposure: In the event that a staff member or student is exposed to a sick or symptomatic person, the following protocols must be followed.

(1) If a student or staff has been exposed to COVID-19, regardless of whether the individual has symptoms or not, the student or staff must not be permitted to enter the program space and must be sent home. Exposed individuals must be directed to stay home for at least 14 days after the last day of contact with the person who is sick. The designated COVID19 point person must consult the local board of health for guidance on quarantine for other students and staff and what additional precautions will be needed to ensure the program space is safe.

(2) If an exposed student or staff subsequently tests positive or their health care provider determines they have confirmed or probable COVID-19, they must be directed to stay home for a minimum of 14 days from the 1st day of symptoms appearing AND be fever-free for 24 hours without fever reducing medications AND experience significant improvements in symptoms. Release from isolation is under the jurisdiction of the local board of health where the individual resides.

(3) If a student's or staff's household member tests positive for COVID-19, the student or staff must self quarantine for 14 days after the last time they could have been exposed.

G. If an Exposed Student or Staff Remains Asymptomatic and/or Tests Negative for COVID-19: If the exposed individual remains asymptomatic and/or tests negative for COVID-19, they must remain in quarantine and continue to monitor for symptoms during the full 14 days.