**Preventing COVID-19 in Schools and Higher Education**

**Be Prepared!** Lessons learned from the 2020-21 school year are that COVID is unpredictable and flexibility is key! Complete your plan to prevent COVID-19 in schools with flexibility in mind. Have a Plan B that allows for the addition of mitigation measures if transmission within the school increases. Plans that involve layered prevention strategies implemented at the same time provide the greatest level of protection and allow for the greatest likelihood of in-person instruction. See [CDC guidance](https://www.cdc.gov) for more details.

**Five key prevention strategies:**

1. **Prioritize:** Universal and correct use of **masks**.
2. **Prioritize:** Physical distancing and/or use of student/staff grouping (cohorting)
3. **Handwashing and respiratory etiquette**
4. **Cleaning** and maintaining healthy facilities
5. **Contact tracing** in combination with isolation and quarantine

**Other Important Considerations:**

1. Recommend **vaccination** for all eligible staff and students. Minimize barriers to access vaccination.
2. Daily **symptom** monitoring at home and school:
   a. There are many different symptom presentations for COVID-19. Have a plan to distinguish between COVID-19 symptoms and other common symptoms experienced by staff and students at school (e.g., **allergies**). See the example symptom and testing grid at the end of this resource.
   b. Develop a plan for isolation and removal of people who have symptoms while at school. Click [here](https://www.cdc.gov) for an example. School nursing staff and designees should familiarize themselves with COVID-19 infection prevention guidelines.
   c. Encourage COVID-19 testing for ill staff and students. This strategy is called **diagnostic testing**.
   d. Develop and communicate a written **isolation** process for staff and students who are ill. This process should include: 1) when an ill person should be kept home, 2) when an ill person will be sent home from school, and 3) criteria for them to return to school.
   e. Develop and communicate a written process for **contact tracing** and **quarantine** of exposed contacts to a person who is ill or tests positive for COVID-19. Review current guidance surrounding quarantine in schools. Exposed contacts who are fully vaccinated or tested positive for COVID-19 within the last 90 days are not required to quarantine. Quarantine recommendations for all other exposed contacts would be dependent on current guidance surrounding quarantine in schools.
   f. Consider developing a plan to randomly test people for COVID-19 without symptoms to identify infected people early – this is called **screening testing**. Asymptomatic, pre-symptomatic, and mildly symptomatic cases occur frequently with COVID-19 which can lead to transmission within the school setting.
3. All school-based COVID-19 testing results are required to be reported to the Oklahoma State Department of Health (OSDH). The designated reporting process for school-based testing is via the State Infection Reporting System (SIRS) which is located in Single Sign-On. Email Dean Hupp at dhupp@e2inttech.com to register for access to SIRS. He can also provide instructions on how to use the system. This will be the only accepted reporting method for school-based testing.
4. Communicate with your local county health department. Ensure points of contact are shared between both entities and establish preferred methods of communication about issues. Notify your local county health department immediately if **two or more** cases from different households are identified within the same classroom or within the same cohort outside of the classroom such as the lunchroom or extra-curricular activities (sports, music, after school clubs, etc.) The health department will work with you to control further spread of infections.
Assessing Symptomatic Persons for COVID-19

Checking students and staff for COVID-19 symptoms can pose challenges given the similarities between certain COVID-19 symptoms and seasonal allergies; challenges with younger persons recognizing when they are sick due to mild symptoms; and the fact that some persons may have COVID-19 and not have any symptoms at all.

OSDH has developed a symptom assessment tool to help determine when someone should be kept home or sent home from school and/or tested for COVID-19:

<table>
<thead>
<tr>
<th>“A” Symptoms</th>
<th>“B” Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fever ≥100.4°F</td>
<td>Nasal Congestion/Stuffy Nose</td>
</tr>
<tr>
<td>Sore Throat</td>
<td>Runny Nose</td>
</tr>
<tr>
<td>Cough</td>
<td>Muscle/Body Aches</td>
</tr>
<tr>
<td>Difficulty Breathing</td>
<td>Fatigue</td>
</tr>
<tr>
<td>Diarrhea or Vomiting</td>
<td>Chills</td>
</tr>
<tr>
<td>New Loss of Taste or Smell</td>
<td>Nausea</td>
</tr>
<tr>
<td>Loss of Appetite</td>
<td></td>
</tr>
<tr>
<td>Elevated Temperature &lt; 100.4°F</td>
<td></td>
</tr>
<tr>
<td>New Onset of Severe Headache</td>
<td></td>
</tr>
</tbody>
</table>

**Recommend testing when:**

- Person has 1 “A” Symptom OR
- Person has 3 “B” Symptoms

Source: CDC’s Operational Strategy for K-12 Schools through Phased Prevention

[Guidance for K-12 Schools (CDC.gov)](https://www.cdc.gov)