

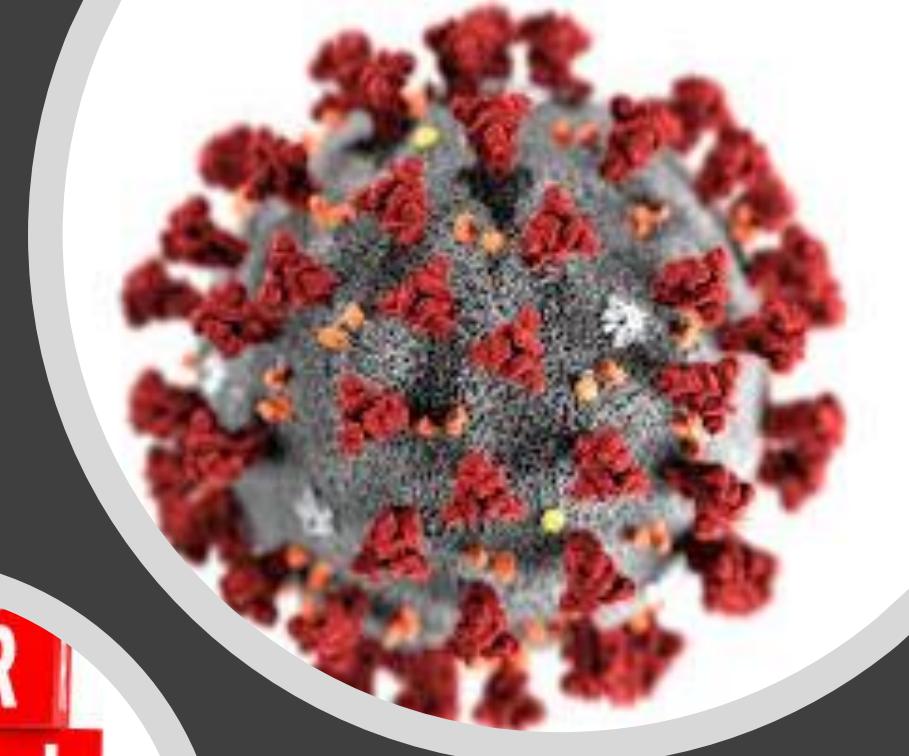
Back To School

Amy R. Ford, DO

Thank you to Resources

- Sara Quates, APNP
- Children's Hospital of Wisconsin
- Advocate Aurora Healthcare
- American Academy of Pediatrics
- Centers for Disease Control
- WI Department of Health Services
- Department of Public Instruction
- Montreal Children's Hospital

- GOAL: SAFETY of our children/faculty/staff/parishioners and keep ALL in LOW RISK category



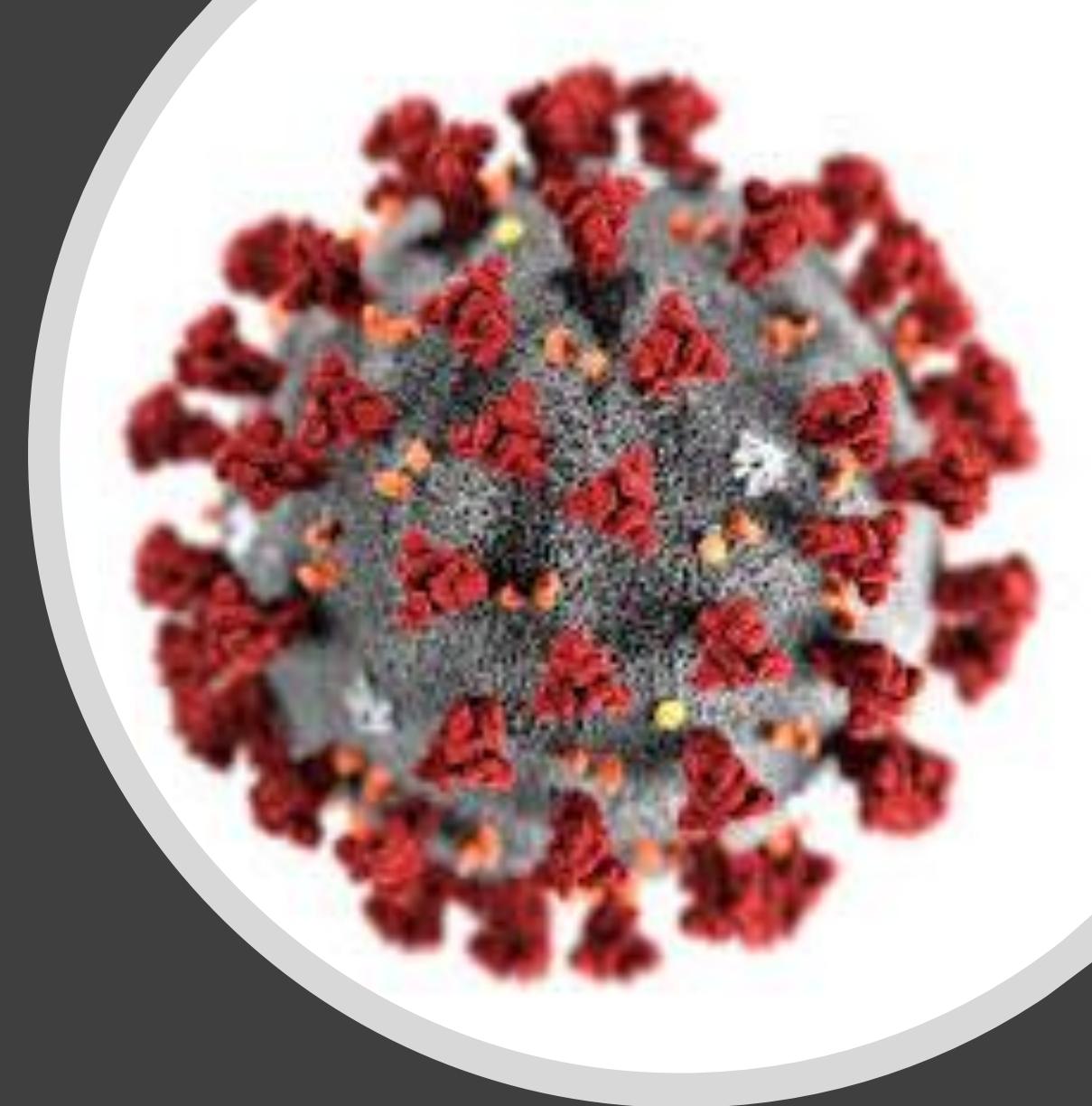
Is it really safe for children to return to school?

- Many experts agree that it appears to be safe for children to return to school. The risk of serious illness from COVID-19 in children is ***very low***.



What is COVID-19?

- Many common old types of coronavirus that cause mild symptoms
- Coronavirus disease 2019 (COVID-19) is a new version
- Respiratory illness
- Highly contagious
- Spreads through droplets when an infected person coughs, sneezes, sings
- Contract by
 - 1) inhaling droplets
 - 2) touching **mouth, nose or eyes** after touching a surface where those droplets have landed



Symptoms of COVID-19

Symptoms may appear
2-14 days after
exposure to the virus

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea
- ***Mimics a common cold. But, treat different than a cold. If child has any symptoms, they need to stay at home***

What should I do if my child is displaying symptoms of COVID-19?

1. Stay at home
2. Call your Pediatrician/Primary Care Physician
3. If you are experiencing an emergency, go to the ER. Call ahead so the medical providers can take precautions to help prevent the spread of disease
4. Will need a written clearance from physician to return to school

- There will be a **SAFE (SEPARATE)** room in the school to keep those suspected of COVID-19 symptoms separated from asymptomatic school population

To what extent will parents be informed if students or teachers have confirmed cases?

- Parents will be notified of a COVID + case when their child is a member of that cohort
- DHS will get involved to determine contact tracing as well
- Unable to give name of child or adult due to HIPAA

Definitions

- Exposure

- Less than 6 feet away for \geq 15 minutes within someone with a confirmed case of COVID-19 and you were not wearing a mask
 - Whole cohort would be considered exposed

- Quarantine (14-24 days)

- Keep exposed person away from others

- Isolation (14 days)

- Keep symptomatic person or COVID positive person away from others in home
 - Isolation can end after 10 days have passed since they first felt ill; they no longer have any symptoms, such as shortness of breath or diarrhea; and they have not had a fever for 24 hours without taking fever-reducing medicine.”

- Separation

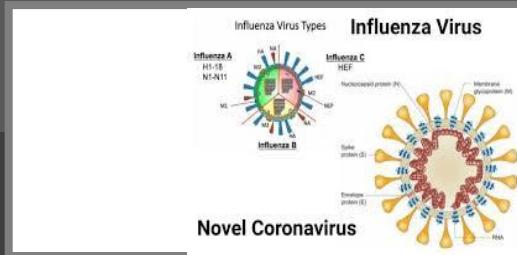
- Student or staff member that may become ill during the day

Who is at High-Risk for Severe Illness?

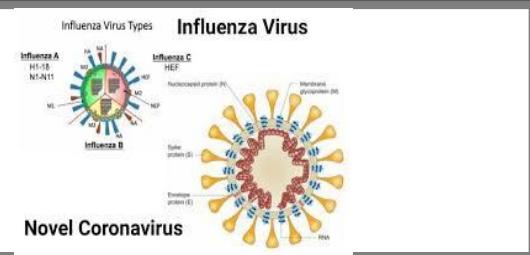
- Older adults
- People with certain underlying medical conditions
- Pregnant people

What about the
siblings of my child
with a chronic
illness? Can they go
to school?

- Healthy children can go to school
- If a healthy sibling develops any symptoms **that may be caused by COVID-19**, they should be isolated in the home, away from the child with the chronic condition, and should not go to school.



FLU vs. COVID-19



- Influenza virus
- Respiratory illness – predictable (surface proteins shift)
- Contagious
- Develops symptoms **1-4** days after exposure
- Contagious for **1-7** days
- School age children are at increased risk for severe illness from flu
- Vaccine (4 approved each year depending on surface protein)
- SARS-CoV-2
- Respiratory illness -unpredictable
- **MORE** contagious
- Develops symptoms **2-14** days after exposure
- Contagious for **2-10** days (with positive test and no symptoms)
- MIS-C
 - Rare but severe complication
- **No vaccine (expediting)**
 - Has to be 50% effective before FDA approves

Symptoms of MIS-C (Multisystem Inflammatory Syndrome in Children)?

- Persistent High Fever
- Swelling of hands and feet
- Rash
- Red eyes and tongue
- Feeling extra tired
- Abdominal pain
- Neck pain
- CDC is still learning about MIS-C and how it affects children, so we don't know why some children have gotten sick with MIS-C and others have not. We also do not know if children with certain health conditions are more likely to get MIS-C. These are among the many questions CDC is working to try to understand.
- CHW had a few kids with this and they recovered and went home

When to Seek Emergency Medical Attention

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

Can you get
COVID-19
more than
once

- **YES**
- We hope that the second time wouldn't be as symptomatic because you have built up some type of immunity
- Immunity **MIGHT** be short-lived

What does my child need to do to protect themselves at school?

- social distancing (staying 6 feet away from others)
- frequent, effective hand washing for 20 seconds with soap and water
 - Use hand sanitizer that contains at least 60% alcohol when soap and water are not available.
 - Remind children to do this after going to the bathroom, before eating and after blowing their nose, coughing or sneezing
- Cover coughs and sneezes
 - Most effective is in elbow
- Avoid close contact with people who are ill
- Get the flu vaccination for everyone 6 months and older
- Stay home when you are sick (NO EXCEPTIONS)
- Clean and disinfect surfaces
- Avoid unnecessary travel

- These should be followed at **school** and at **home**

Masks

- **Gov. Evers Issues Executive Order Declaring Public Health Emergency and Requiring Face Coverings Statewide on June 30, 2020**
- Under this order, Wisconsin residents ages five and older are required to wear a face covering when they are indoors or in an enclosed space with anyone outside their household or living unit. Face coverings are strongly recommended if you are outdoors and maintaining physical distancing is not possible. The order also enumerates exceptions to the requirement, listing activities such as when an individual is eating, drinking, or swimming. Individuals with health conditions or disabilities that would preclude the wearing of a face covering safely are also exempt from the requirement

Tips for getting kids to
wear masks

[https://childrenswi.org/
newshub/stories/kid-
mask-tips](https://childrenswi.org/newshub/stories/kid-mask-tips)

- Be a role model
- Do practice sessions at home
- Make it fun
- Normalize it
- Provide incentives if necessary
- Acknowledge their frustration

Hand washing videos

- Thorough Example
- <https://www.youtube.com/watch?v=fpXh2XHwMmE>
- Kid friendly Example
- <https://www.youtube.com/watch?v=qJG72sycQB8&feature=youtu.be>



What About My Child's Psychological Health?

- Children pick up our emotions. Keeping them safe doesn't mean you have to scare them. Prepare for the conversation
- Adults need to manage fears. Be mindful what you say in front of your children. Children are impressionable
- Ask your kids, what is it that you are most scared of
- Kids can see grandparents if they don't have chronic medical conditions. No hugging. Have meetings outside.
- Socialization in kids: going to look different right now, outdoor activities at a distance, create friend bubbles, social media that can communicate in real time. Need to be aware of who they are talking to online
- Rules will be different at home, but make consistency.

Here are a few tips for talking to children about COVID-19:

[https://childrens
wi.org/newshub/s
tories/covid-19-
talking-to-kids](https://childrenswi.org/newshub/stories/covid-19-talking-to-kids)

- Stay calm, be aware of your own feelings and continue self-care.
- Listen and provide reassurance.
- Help them understand with appropriate language.
- Find out what your child already knows and follow their lead.

According to the CDC guidelines

- previously used threshold of $> 100.4^{\circ}\text{F}$ or $>38.0^{\circ}\text{C}$
- New threshold of $\geq 100.0^{\circ}\text{F}$ or $\geq 37.8^{\circ}\text{C}$

Caution

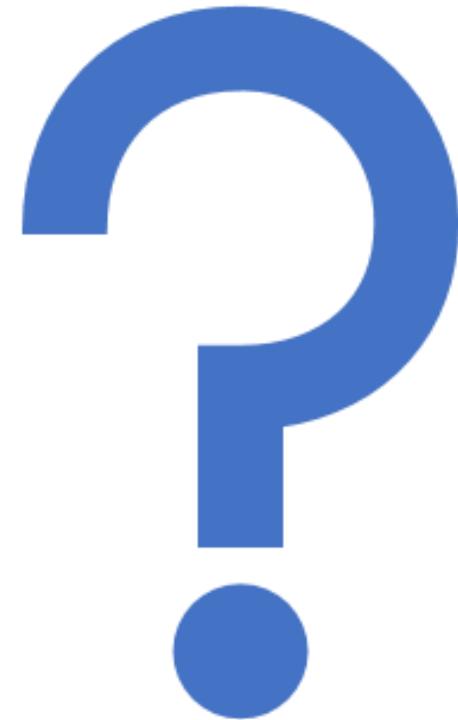
- Our analyses suggest children younger than 5 years with mild to moderate COVID-19 have high amounts of SARS-CoV-2 viral RNA in their nasopharynx compared with older children and adults. Our study is limited to detection of viral nucleic acid, rather than infectious virus, although SARS-CoV-2 pediatric studies reported a correlation between higher nucleic acid levels and the ability to culture infectious virus.⁵ Thus, young children can potentially be important drivers of SARS-CoV-2 spread in the general population, as has been demonstrated with respiratory syncytial virus, where children with high viral loads are more likely to transmit.⁶ Behavioral habits of young children and close quarters in school and day care settings raise concern for SARS-CoV-2 amplification in this population as public health restrictions are eased. In addition to public health implications, this population will be important for targeting immunization efforts as SARS-CoV-2 vaccines become available.

Take Home Points



- Get your **FLU immunization and all other vaccinations**
- Preventative care: get well child check
- It is up to **EVERYONE** (parents and teachers) to teach proper hygiene: **COMMUNITY EFFORT**
- The decision to return to school is a **PERSONAL** choice (**Let's teach the adults and kids to RESPECT others' decisions**)

Questions?



Thank you

#TeachersAreHeroes
#MrMattIsAHero
#ParentsAreHeroes
#PrincipalsAreHeroes



What is School
going to look
like?