

# COVID-19

Response Guidance for Polk  
County Public Schools  
August 20, 2020



POLK COUNTY  
PUBLIC SCHOOLS  
STUDENTS FIRST

Florida  
HEALTH  
Polk County



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# INTRODUCTION

This resource draws heavily upon the work done by Washington State Public Health Department and the Utah Schools COVID Response Plan.

Schools are fundamental to child and adolescent development and well-being and provide our children and adolescents with academic instruction, social and emotional skills, safety, reliable nutrition, physical/speech and mental health therapy, and opportunities for physical activity, among other benefits. This guidance strives to provide feasible actions our schools can take to mitigate risks to student and staff from COVID-19.

The following guidance incorporates information from [CDC Interim Guidance for Administrators of US K-12 Schools and Child Care Programs--Plan, Prepare, and Respond to Coronavirus Disease 2019 \(COVID-19\), K-12 Schools and Child Care Programs and CDC COVID-19 Considerations for Schools.](#)

Promoting health and safety in schools relies on communication between schools and local public health authorities. FERPA allows schools to share personally identifiable information with local public health authorities without consent, including parental consent, when needed to respond to a health emergency

([https://studentprivacy.ed.gov/sites/default/files/resource\\_document/file/FERPA%20and%20Coronavirus%20Frequently%20Asked%20Questions\\_0.pdf](https://studentprivacy.ed.gov/sites/default/files/resource_document/file/FERPA%20and%20Coronavirus%20Frequently%20Asked%20Questions_0.pdf)).

This guidance is based on existing science, expert public health opinion, current policies, and stakeholder input.

Florida Department of Health in Polk County (FDOH-Polk) recognizes the need to plan ahead while the science of COVID-19 evolves. Further, the trajectory of disease in our state and nation may require changes to our state's and district's response including in schools. FDOH-Polk will update this guidance and the K-12 decision tree periodically and work to ensure schools and families are aware of updates.

# KEY PRINCIPLES FOR REDUCING POTENTIAL EXPOSURES

The mainstays of reducing exposure to the coronavirus and other respiratory pathogens are:

- **Keep ill persons out of school** — educating students, families and staff to stay home when sick, and using screening
- **Cohorts** — conducting all activities in small groups that remain together over time with minimal mixing of groups.
- **Physical distancing** — minimizing close contact (less than six feet) with other people.
- **Hand hygiene** — frequent washing with soap and water or using alcohol-based hand gel.
- **Protective equipment** — use of face coverings and other types of barriers
- **Environmental cleaning and disinfection** — especially of high-touch surfaces
- Improve indoor ventilation
- **Isolation** of sick people and exclude exposed people.
- With the above considerations foremost, outdoor activities are safer than indoor activities.

Based on these principles, everyone should understand that more, closer, and longer interactions between people is associated with more risk of COVID-19. Risk of COVID-19 spread increases in school settings as follows:

- **Lowest Risk:** Students and teachers engage in virtual-only classes, activities, and events.
- **More Risk:** Small, in-person classes, activities, and events. Groups of students stay together and with the same teacher throughout/across school days, and groups do not mix. Students remain at least six feet apart and do not share objects (e.g., hybrid virtual and in-person class structures, or staggered/rotated scheduling to accommodate smaller class sizes).
- **Highest Risk:** Full sized, in-person classes, activities, and events. Students are not spaced apart, share classroom materials or supplies, and mix between classes and activities.

# GENERAL GUIDANCE

Do not allow students, staff, vendors, parents and guardians, or guests on-site if they:

1. Are showing [symptoms of COVID-19](#).
2. Have been in close contact\* (within 6 feet for at least 15 minutes) with someone who has confirmed COVID-19 in the last 14 days.
3. Have tested positive for COVID-19 in the past 10 days

Ensure staff are trained in health and safety protocols for your site, including how to screen for symptoms, maintaining physical distance, wearing appropriate PPE, importance of frequent cleaning and handwashing, and what to do if someone develops signs of COVID-19.

Communicate regularly with students, families and staff, and emphasize the importance of staying home when sick, physical distancing of six feet, and hand hygiene. Communication should be provided using multiple modalities (posters, written hard copy, email, text message, phone, video conferencing) and in languages that parents best understand.

All students K-12, staff, volunteers, and guests must wear cloth face coverings in our schools and while riding school transportation. In addition, schools have a general obligation to provide employees a safe and healthy work site in accordance with state and federal law and safety and health rules, including addressing hazards associated with COVID-19.

Monitor student and employee attendance and absences have flexible locally determined leave policies and practices, and have access to trained substitutes to support employee absences.

## People at High Risk for Serious Health Problems from COVID-19

Those at [high risk](#) for health problems from COVID-19 should consult with their health care provider when considering whether to provide or participate in K-12 activities. Families with a member who is at high risk from COVID-19 should carefully consider risks and benefits of sending their student to in person school.

## Drop-Off and Pick-Up

Develop a system for drop-off and pick-up that keeps families at least six feet from each other and reduces their need to enter the school. This may include staggering drop-off and pick-up times for various groups, one-way traffic flows, greeting students at their vehicle, or placing distancing markers on walkways.

## Health Screening at Entry

Staff and students with any illness must stay home. Students and staff should be assessed for illness before attending school each day. Encourage parents to be on the alert for signs of illness in their children and to keep them home when they are sick. Screen children upon arrival, using no-touch thermometers. Adults screening for temperatures should wear appropriate PPE including a mask, gloves, and face shield. Per district protocol, at least 20% of the school population should be screened for fever using a no-touch thermometer each day. All individuals who have a fever upon entry, must be evaluated by the school LPN. All students exhibiting a fever should be sent home.

Before school each day, ask parents, guardians, and students (grades 6-12) to review the following questions on the **Daily Home Screening for Students (Attachment 1)** and stay home if the answer is yes to questions 1-7. Staff should fill out the daily symptom questionnaire online and follow procedures for next steps if they are symptomatic.

# REDUCING TRANSMISSION

## Grouping Students

Create cohorts or groups of students with dedicated staff who remain together throughout the day, at recess and lunch time, and remain consistent from day to day. Groups should not be combined (e.g. for lunch or recess). If possible, rotate teachers rather than students to avoid mixing of students in the hallways. Consider block schedules to minimize mixing among students or combining of groups. **For all students, assign seating in classrooms to be able to more quickly identify close contacts of COVID-19 cases when they occur and make a seating chart for all classes that can readily be shared.** Multiple groups of students may use the same facility as long as they are in limited contact with other groups.

## Physical Distancing

Practice physical distancing of six feet within each group or classroom of students as much as possible. Create space between students and reduce the amount of time they are close with each other. Your ability to do this will depend on students' ages and developmental and physical abilities. Select strategies to increase physical distancing that will work for your school and the space available. Maintaining six feet of distance is most important when students or staff will be engaged in something for more than a few minutes, like during class, reading or quiet time, or eating lunch. There may be brief moments, such as passing by others in the hallway or during play at recess when students are less than feet apart from each other. Not all strategies will be feasible for all schools. Think creatively about all opportunities to increase physical space between students during all scheduled activities and limit interactions in large group settings.

Schools may consider physical distancing strategies such as:

- **Increase the space between desks and assign seating in all grade levels and classes.** Rearrange student desks or workstations to provide six feet of distance between students. Turn desks to face in the same direction (rather than facing each other) to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).
- Reduce the number of students at tables, lab benches, or other workstations to increase physical distance.
- **Reduce the number of students in the halls and restrooms at one time.** Stagger release of classes, restroom breaks, recess, etc. Cancel activities where multiple classrooms interact.
- **Reduce congestion in the health office.** For example, dedicate an isolation room for children with flu-like symptoms and a satellite location for first aid or medication distribution.
- Mark traffic flow and designate entrances and exits to minimize face to face contact.
- **Stagger arrival and/or dismissal times.** These approaches can limit the amount of close contact between students in high-traffic situations and times.
- **Place tape, spots, cones, paint or other markers to signal six feet in areas where students may be waiting in line.** This could include symptom screening points, restrooms, water

fountains, hand washing or sanitizing stations, the main classroom door, the cafeteria, etc.

- **Limit the presence of volunteers** for classroom activities, mystery readers, cafeteria support, and other activities.
- **Limit in person activities that are considered high risk.** These include choir, playing of wind instruments (band), contact sports, or other activities that require students to remove face coverings and/or be in close contact with one another as these may contribute to transmission of COVID-19.
- **Avoid scheduling in person field trips, assemblies, and other large gatherings.** Cancel in-person activities and events such as field trips, student assemblies, special performances, STEAM fairs, school-wide parent meetings, or spirit nights.
- **Limit cross-school transfer for special programs.** For example, if students are brought from multiple schools for special programs (e.g., music, robotics, and academic clubs), consider using distance learning to deliver the instruction or temporarily offering duplicate programs in the participating schools.
- **Teach staff, students, and their families to maintain distance from each other in the school.** Educate staff, students, and their families at the same time and explain why this is important.
- Keep students outside more, as weather and space permit.

## Meals

Limit gatherings and potential mixing of classes or groups in the cafeteria or other communal spaces. Consider having students take their meals outside or in the classroom. You may accomplish this through meal delivery to classes, or through grab-and-go services.

If using the cafeteria, have students sit with their class or group, and ensure physical distance between students in a group or cohort and between groups. Stagger mealtimes in lunchroom or dining hall. Arrange and direct the flow of students to reduce crowding such as at handwashing sinks, food vending areas, etc. Space students as far apart as you can at the table. Make sure tables are at least six feet apart.

Individually plate food for each student. The staff (not students) should handle utensils and serve food to reduce spread of germs.

Clean and sanitize tables before and after each group eats. Use a washable plastic tablecloth for wooden tables.

## Hygiene Practices

Children and adults should clean hands when they arrive at school, before meals or snacks, after outside time, after going to the bathroom, after blowing nose or sneezing, and before leaving to go home. Help young children to make sure they are doing it right. The best option is to wash hands with soap and water for at least 20 seconds. If soap and water are not readily available, use an alcohol-based hand gel with at least 60 percent alcohol and preferably fragrance-free. Supervise use of alcohol-based hand gel by young children.



Teach children and adults not to touch their eyes, nose, and mouth with unwashed hands. Cover coughs or sneezes with a tissue, throw the tissue in the trash, then clean hands with soap and water or hand gel.

## Cloth Face Coverings

Wearing cloth face coverings may help prevent the spread of COVID-19 and is required for staff and students in all public spaces, except where specific exceptions are made based on age, development, or disability. See the [CDC Recommendation Regarding the Use of Cloth Face Coverings](#) for more information. All students K-12, volunteers, and guests must wear cloth face coverings at school. The district has provided schools face coverings for staff and students if they do not have their own. Teachers and students who have a medical condition which prohibit the use of a face mask must have a doctor's note to that effect. Younger students must be supervised when wearing a face covering may need help putting them on, taking them off, and getting used to wearing them.

**Even when cloth face coverings are worn, continue practicing physical distancing.** Students may remove face coverings to eat and drink and when they go outdoors for recess, physical education, or other outside activities when they can be physically distanced.

## Bus Transportation

Principles for COVID prevention within school transportation are:

- Keep riders as far apart as possible on the bus.
- Load bus from back to front, assigning seats if possible.
- If possible, seat with household members or members of their school group/cohort.
- Maximize outside air and keep windows open as much as possible
- Encourage walking or biking where safe, or being driven by caregivers as feasible
- Riders and staff members must wear a cloth face covering, when boarding, riding and exiting the bus.
- Encourage students to wash or sanitize hands when they leave their home or classroom immediately before boarding the bus
- Clean and disinfect frequently touched surfaces, including the tops and backs of seats, using an EPA registered product provided by the district and use manufacturers' instructions for use.

## Cleaning and Disinfecting Procedures

Schools should have infection control plans, updated to reflect what is known about COVID-

19. A good resource is [Cleaning for Healthier Schools – Infection Control Handbook 2010](#)

Increase how often you clean.

- *Cleaning* removes germs, dirt, food, body fluids, and other material. Cleaning increases the benefit of sanitizing or disinfecting.
- *Sanitizing* reduces germs on surfaces to levels that are safe.
- *Disinfecting* kills germs on surfaces of a clean object.
- The U.S. Environmental Protection Agency (EPA) regulates sanitizer and disinfectant chemicals. If you sanitize or disinfect without cleaning first, it will reduce how well these chemicals work and may leave more germs on the surface.

Current [guidance for cleaning and disinfection for COVID-19](#) from the CDC states that disinfectants should be registered by the EPA for use against the COVID-19. See [List N: Disinfectants for Use Against SARS-CoV-2 \(COVID-19\)](#).

Clean and sanitize toys, equipment, and surfaces in the program space. Clean and disinfect high-touch surfaces like doorknobs, faucet handles, check-in counters, and restrooms. Use alcohol wipes or 70% isopropyl alcohol to clean keyboards and electronics. Outdoor areas generally require normal routine cleaning and do not require disinfection. Wash hands after you clean.

If groups of students are moving from one area to another in shifts, finish cleaning and disinfecting before the new group enters the area. Clean and disinfect high touch surfaces each night after students leave.

Always follow the disinfectant instructions on the label:

- **Use disinfectants in a ventilated space. Heavy use of disinfectant products should be done when children are not present, and the facility should air out before children return.**
- Use the proper concentration of disinfectant.
- Keep the disinfectant on the surface for the required wet contact time.
- Follow the product label warnings and instructions for PPE such as gloves, eye protection, and ventilation.
- Keep all chemicals out of reach of children.
- Facilities must have a Safety Data Sheet (SDS) for each chemical used in the facility.
- Parents, teachers, and staff should not supply disinfectants and sanitizers.

## Carpets

If possible, vacuum daily (when children are not present). Use a vacuum with a HEPA (high efficiency particulate air) filter – or use HEPA vacuum bags. Having both is even better.

## Outdoor Areas

Outdoor areas, like playgrounds in schools and parks, generally require normal routine cleaning, but do not require disinfection.

- Do not spray disinfectant on outdoor playgrounds—it is not an efficient use of supplies and is not proven to reduce risk of COVID-19 to the public.
- High-touch surfaces made of plastic or metal, such as grab bars and railings, should be cleaned routinely.
- Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.

## Ventilation

Ventilation is important to have good indoor air quality. Offer more outside time, open windows often, and adjust the HVAC system to allow the maximum amount of outside air to enter the program space. Use of fans for cooling is acceptable. They should blow away from people. There is no special cleaning or disinfection for heating, ventilation, and air conditioning (HVAC) systems.

## Shared Hands-On Teaching Materials

Clean and disinfect hands-on materials often and after each use. Limit shared teaching materials to those you can easily clean and sanitize or disinfect. Children's books and other paper-based materials are not high risk for spreading the virus.

# WHAT TO DO IF SOMEONE DEVELOPS SIGNS OF COVID-19

## Isolation Room

Every school should have an identified space for isolating ill persons until they can be sent home. If possible, establish two isolation rooms that can be used on an A/B schedule to allow 24 hours to pass before initial cleaning. It is beneficial if the room has windows that can be opened/closed and two entrances if possible. Keep doors/room closed until cleaning can occur after 24 hours. Ensure students can be spaced at least six feet apart with any cots spaced appropriately as well. Ideally, the isolation unit would have a private bathroom for use only by persons being evaluated for COVID. If private bathroom for ill persons is not available, the ill person should wear a face mask when traveling to and from the communal bathroom. Clean all high touch areas between patient room and bathroom as well as in the bathroom. Thoroughly clean and disinfect the communal bathroom immediately after use. Increase ventilation in the bathroom by keeping a window open and/or turning on a fan that vents to the outside if possible.

**Students who are ill, but do NOT have COVID symptoms (ie—toothache, earache, etc.) should NOT be sent to the isolation room and should be treated in the clinic.**

Ensure that the isolation room is supervised at all times when occupied by students. It is NOT recommended that the LPN staff the isolation room. However, the LPN should be available to do quick assessments of students who are sent to the isolation room. Isolation room monitors are not required to be trained Health Contacts, but Health Contact training is available online. Contact Liz Hargis ([liz.hargis@polk-fl.net](mailto:liz.hargis@polk-fl.net)) to schedule someone for online Health Contact training. Isolation room monitors should wear proper PPE: surgical mask, face shield and gloves. If there is a possibility of the monitor coming into contact with bodily fluids, a gown should also be worn.

## Procedures for dealing with students who experience COVID-like symptoms at school

Please adhere to the following procedures in the Isolation Room:

1. Students in the isolation room must wear a face covering (preferably a medical mask) and practice social distancing. Cots and/or chairs should be at least 6 feet apart.
2. Student's temperature will be checked according to each school's schedule, using a no touch thermometer.
3. Upon arrival at school each day, if a student has a temperature of 100.0 or above, a designated staff member/isolation monitor will take them to the isolation room and call for the nurse.



4. During the course of the school day, if a student complains of any of the symptoms listed below, the nurse should evaluate the student. The nurse may go to the classroom, or have an adult bring the child to the isolation room. Other students should not escort a sick child to the isolation room.
5. The isolation room is only for students who display symptoms consistent with COVID-19.
6. This isolation monitor will monitor the student until the nurse can make an evaluation.
7. The nurse will evaluate the student for symptoms that are consistent with COVID-19. These are:
  - Temperature of 100.0 degrees Fahrenheit or higher by no-touch thermometer
  - Sore throat
  - New uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline).
  - Diarrhea, vomiting or abdominal pain
  - New onset of severe headache, especially with fever
  - New loss of sense of taste and smell

(These symptoms may be updated as more information becomes available from the CDC.)

8. If a student displays any of the above symptoms, they will be sent home.
9. Students may come to the clinic with other symptoms, such as an earache, bone/joint complaints, chronic allergies/asthma symptoms (check current MIF), etc. These signs/symptoms are not consistent with COVID-19 and they should not be sent to the isolation room. The nurse will need to use their nursing judgment and follow the established clinic protocols. Call the Health Services RNs or FDOH RN for guidance.
10. The nurse will contact the parent to discuss their findings and the need for their child to go home.
11. While waiting for pickup, the isolation room monitor should interview the student using the **Elementary Isolation Interview Form or the Secondary Isolation Interview Form (Appendices 2A and 2B)** and give a copy of the questionnaire to both the COVID Liaison and LPN. Ensure the isolation room monitor is at least 6 feet from the student during the interview. This interview will allow the school to quickly identify close contacts should a student test positive for COVID-19. Close contacts are defined as persons who were within six feet of the confirmed cases for approximately 15 minutes or more.
12. The student is to stay in the isolation room until the parent can pick them up.
13. The isolation monitor will monitor the student during this time.
14. Nurse will prepare a Pandemic Information Packet and give to student or place this in the child's backpack. The packet will include the **Pandemic Health Communication Form (Appendix 3)** that includes a probable return to school date, the **What You Should Do If Your Child Has Symptoms of COVID-10** handout (**Appendix 4A**) and the **What You Should Do If Your Child Has Been Exposed to COVID-19** handout (**Appendix 4B**). The Pandemic Health Communication Form should be printed on yellow paper.
15. If the student has siblings at the school, they too, will need to be sent home to quarantine at home as well. The Pandemic Health Communication form has a section that addresses siblings.
16. When leaving the isolation room, the staff member should dispose of PPE, wash their hands, and return to their regularly assigned duties. Gowns may be hung between uses and re-worn for the day. Dispose of gowns at the end of the day or anytime if soiled.
17. Nurse will make FOCUS entry in the Daily Health Services section for this clinic visit. In addition, the nurse will document the visit on the **COVID-19 Surveillance Log (Appendix 5)**. This log should be utilized as a

surveillance measure of illness within the school. The nurse should look for trends of illness within a two-week period to identify potential hot spot. Any hot spot issues should be reported to DOH RNs and MWC Health Services RNs.

18. Air out and then clean and disinfect the areas where the person was after they leave.

19. At the end of the day, for any student sent home for COVID-like symptoms, the COVID Liaison will utilize the completed Close Contact Questionnaire and should pull or have a designee pull:

- class rosters
- bus rosters (if child rode the bus)
- class schedules including specials if applicable for two days before symptom onset to current date
- seating charts for classes
- rosters for any sport team or extra-curricular club attended two days before symptom onset to current date
- The Close Contact Questionnaire should also be included in this information.

(This will help if Contact Tracing is necessary. This information should be stored by student in the COVID Liaison's office.)

## Returning to school after having suspected signs of COVID-19 without testing or a negative test result

For ill persons **without** known exposure to a confirmed COVID-19 case:

- **If testing for active COVID-19 is not performed**, they should isolate at home until fever free for 24 hours without fever reducing medication, symptoms are improved, and at least 10 days have passed since date of symptom onset. (People with severe disease or immunocompromised may need to be isolated at home for longer.)
- **If testing for active COVID-19 is negative**, they should stay home until fever-free for 24 hours and symptoms are improved. Proof of a negative PCR test will be necessary to return to school in this situation.
- **Students who have been released by a physician due to a confirmed non-COVID related illness should base their return date on the doctor's release.** Students must present the release to the school in order to return before the 10-day isolation period is complete.

For ill persons **with a known close exposure** to a confirmed COVID-19 case:

- They should be encouraged to consult their medical provider and be tested for COVID-19.
- They should Isolate at home until fever free for 24 hours without fever reducing medication, symptoms are improved, and at least 10 days have passed since date of symptom onset. (People with severe disease or immunocompromised may need to be isolated at home for longer.)

**Ask staff and students' parents or caregivers to inform the school right away if the ill person is diagnosed with COVID-19.**

If a student or staff member tests positive for COVID-19 or is deemed to have a probable case of COVID-19

(symptoms and known exposure to a COVID + individual), it is possible that many of the student's classmates and teachers will be considered close contacts and need to be quarantined for 14 days. This will be decided on a case by case situation in collaboration with the Health Department. Refer them to [What Should You Do If Your Child Was Exposed to Someone with COVID-19?](#) (Appendix 4B)

## Returning to school after testing positive for COVID-19

A staff member or student who had confirmed COVID-19 can return to work/school when:

- They are fever-free for 24 hours without the use of fever-reducing medications; **AND**
- Symptoms are improving; **AND**
- At least 10 days have passed since that date of symptom onset. (This may be different than the date they present themselves in the clinic.)

Staff will be required to have a doctor's release to return to work. Students may return without a doctor's note as long as all other criteria are met.

## Returning to school after being in close contact to someone with COVID-19

If a person had close contact to someone with COVID-19, but they are not sick, they should watch their health for signs of fever, cough, shortness of breath, and other COVID-19 [symptoms](#) during the 14 days after the last day they were in close contact with the person sick with COVID-19. They should quarantine at home and not go to work, childcare, school, or public places for 14 days. Total days of quarantine may be longer than 14 days if the exposure was someone in the person's household.

NOTE: A negative test after exposure does not shorten the 14-day quarantine period for asymptomatic individuals.

If a person develops symptoms of COVID-19 during their quarantine, they should seek testing for COVID-19, and follow guidance above for confirmed COVID-19 cases.

## Environmental cleaning after a suspected or confirmed case is identified

When a school sends a person with COVID-19 [symptoms](#) home, or learns a confirmed case of COVID-19 has been on the premises, clean and disinfect the areas where the ill person spent time.

- Close off areas visited by the ill persons. Open outside doors and windows and use ventilating fans to increase air circulation in the area. Wait 24 hours, or as long as practical, before beginning cleaning and disinfection.
- Cleaning staff should clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment (like tablets, touch screens, keyboards, remote controls) used by the ill persons, focusing especially on frequently touched surfaces.

- If it has been more than 7 days since the person with suspected/confirmed COVID-19 visited or used the facility, additional cleaning and disinfection is not necessary.

## Contact investigation, contact tracing, and quarantine of close contacts of confirmed COVID-19 cases

The school plays an important role to quickly identify close contacts and communicate with parents and guardians. **When a school learns of a confirmed case of COVID-19 who was on the school premises, the COVID Liaison should:**

1. Immediately notify the DOH-Polk School Hotline at 863-519-7912 and Mark Willcox Center at 291-5355.
2. Send the collected close contact information, schedules, class lists, etc. (obtained when student became ill to local public health). If close contact information was not collected, begin collect schedules, class lists, and seating charts, and send to DOH-Polk as quickly as possible. Ensure to include all likely school-based close contacts of the COVID-19 case from 2 days before symptoms started (or date of positive test if asymptomatic) until the time the case was no longer in school. Close contacts are defined as persons who were within six feet of the confirmed cases for approximately 15 minutes and would include:
  - Siblings and other students in the household
  - Some or all of the students and teachers in the infected person's group (classroom, cohort)
  - Others sitting close to the student on the school bus
  - Participants in after-school clubs/activities/sports if student attended meetings/practices were conducted 2 days prior to symptom onset to last date of contact at school.
3. DOH-Polk will advise as to which groups should be sent home for quarantine.
4. Once the DOH-Polk directs which groups should be sent for quarantine, Polk County Public Schools will send a mass message concerning the confirmed positive case at the school. The message will be sent via the district's automated telephone and email system (SchoolMessenger). The school's principal and COVID Liaison will work with the PR department to customize a communication template, which has been created to address these situations. Once finalized, the COVID Liaison will send out a school-wide alert to all parents that a confirmed case has been documented at school.
5. In addition to SchoolMessenger, other notifications may be sent via the school website and school social media accounts. The school principal and COVID Liaison will work with the PR department to determine the most appropriate and effective communications mediums for each situation.
6. **Principals and COVID-Liaisons should consult with the PR department prior to sending any COVID-19-related message.**

Besides a mass message for the school's entire population, a second, more detailed message, containing instructions for quarantining, monitoring of symptoms, etc., will be sent to directly affected individuals (those in close contact with the confirmed case). The Florida Department of Health will craft the message, but it will be sent through School Messenger. COVID Liaisons will be responsible for identifying the families who should receive this message. DOH-Polk will reach out to each close contact by phone. Because it may take time for DOH to contact all close contacts, the school communication is important to ensure a timely response.



7. Public Relations has developed the following talking points for front-office staff at affected schools to share with parents and other concerned partners who call:

**When there is a confirmed positive case:**

- Reiterate the message sent via SchoolMessenger.
- *Any affected individuals will be contacted by the Florida Department of Health with further instructions.*
- *The Health Insurance Portability and Accountability Act (HIPAA) and other privacy laws restrict us from disclosing or confirming any personally identifiable information. We cannot identify anyone who has tested positive.*

**When there is an unconfirmed case that is being talked about in the community/on social media:**

- *We are aware of a situation involving a student(s)/staff member(s) who is/are exhibiting flu-like symptoms.*
- *The Health Insurance Portability and Accountability Act (HIPAA) and other privacy laws restrict us from disclosing or confirming any personally identifiable information.*
- *We are working closely with the Florida Department of Health.*
- *As more information becomes available that we are able to share publicly, we will update our families.*

## COVID-19 school closures

Polk County Public Schools will work diligently with the DOH-Polk to determine when and if classes, grade levels, and schools should be closed due to COVID-19 spread within a school. If a school must close, the staff and students would switch to remote learning for the time period of closure. Closures may vary in length between a few days to two quarantine weeks depending on the situation.

In the event of a full or partial campus closure, the PR department will work with the principal and COVID Liaison to customize another communication template to address the specific situation

# COVID-19 INFORMATION AND RESOURCES

**Have more questions about COVID-19? Please reach out to:**

***Florida Department of Health in Polk County***

State Call Center at 866-779-6121 (24/7)

Polk COVID-19 Information line at 863-519-7911 (M-F/8am-5pm)

***Polk County Public Schools, Mark Wilcox Center*** at 291-5355 (M-TH/8am-4:30pm)

## SCENARIO EXAMPLE:

## A TEACHER TESTS POSITIVE FOR COVID-19.



Mrs. Watkins is a 2nd grade teacher.  
*Mrs. Watkins tested positive for COVID-19.*



**She must isolate at home.** She can't go to work until her symptoms start to get better and she has been fever-free for 24 hours without medicine AND it has been at least 10 days since she first had symptoms or tested positive.

- The health department called Mrs. Watkins to find out who she had been in close contact with, about 6 feet or 2 meters (about 2 arm lengths) for 15 minutes or more.
- Anyone in close contact with Mrs. Watkins up to 2 days before she got sick or tested positive should quarantine for 14 days.

*Anyone who lives with Mrs. Watkins' must quarantine for 14 days.*  
This means the person should stay home and away from other people as much as possible. The health department will tell the people who live with Mrs. Watkins how long to quarantine and when to get tested.



*Mrs. Watkins was at school 2 days before she got sick and tested positive for COVID-19.*

The health department called the school to tell them Mrs. Watkins tested positive for COVID-19.

The health department will notify anyone who is at higher risk if he or she was exposed to COVID-19. The school will notify anyone else who was exposed in the school.



*The students in Mrs. Watkins' class should quarantine for 14 days from the date of exposure.*



No one else at the school was in close contact with Mrs. Watkins. No other students, teachers, or employees need to quarantine. No one else had a close contact exposure to COVID-19.



The health department will notify the school when Mrs. Watkins has finished isolation and can return to school.



## SCENARIO EXAMPLE:

# A STUDENT TESTS POSITIVE FOR COVID-19.



Pearl is an 8th grade student at a middle school.  
Cole is Pearl's brother. He is a 5th grade student at an elementary school. Pearl tested positive for COVID-19.



**Pearl must isolate at home.**

She can't go to school until her symptoms start to get better and she has been fever-free for 24 hours without medicine AND it has been at least 10 days since she first had symptoms or tested positive.

The health department called Pearl's parents to find out who she had been in close contact with, about 6 feet or 2 meters (about 2 arm lengths) for 15 minutes or more. Anyone in close contact with Pearl up to 2 days before she got sick or tested positive should quarantine for 14 days.



*Pearl's family must quarantine for 14 days.*

This means they should stay home and away from other people as much as possible. The health department will tell Pearl's family when they can end quarantine and when to get tested. Even if Pearl's family never gets sick or they test negative for COVID-19, they must finish their 14-day quarantine.



*Pearl's brother Cole must quarantine for 14 days because someone who lives in his home tested positive for COVID-19.*

Even if he doesn't get sick or tests negative for COVID-19, Cole must finish his 14-day quarantine. No one else in Cole's class or his school needs to quarantine. His school does not need to tell other parents, teachers, or employees that Cole's sister tested positive for COVID-19.



*Pearl was at school 2 days before she tested positive for COVID-19. The health department called the school to tell them Pearl tested positive for COVID-19. The health department will notify anyone who is at higher risk they were exposed to COVID-19. The school will notify anyone else who was exposed in Pearl's school.*



*The students in Pearl's classes should quarantine for 14 days from the date of exposure.*



**Pearl's teachers should quarantine at home for 14 days from the date of exposure**

No one else at the school was in close contact with Pearl. No other students, teachers, or employees need to quarantine. No one else had a close contact exposure to COVID-19.



The school does not need to notify any other parents, teachers, or employees in the school that a student tested positive. Only the parents of students, teachers, and employees who were exposed will be notified.

*The health department will notify the school when Pearl has finished isolation and can return to school.*

## SCENARIO EXAMPLE:

# A STUDENT ON A SCHOOL SPORTS TEAM TESTS POSITIVE FOR COVID-19.



Sam is a 12th grade student at the high school.  
He plays on the school football team.

*Sam tested positive for COVID-19.*



**He must isolate at home.**

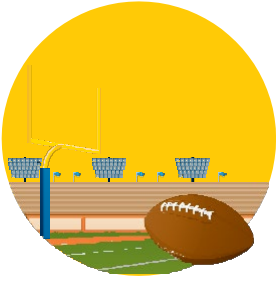
He can't go to school or play football until his symptoms start to get better and he has been fever-free for 24 hours without medicine AND it has been at least 10 days since he first had symptoms or tested positive.

The health department called Sam and his parents to find out who he had been in close contact with, about 6 feet or 2 meters (about 2 arm lengths) for 15 minutes or more up to 2 days before he got sick and tested positive. Anyone in close contact with Sam should quarantine for 14 days.



*Sam's family must quarantine for 14 days.*

This means they should stay home and away from other people as much as possible. The health department will tell his family when they can end quarantine and when to get tested. Even if his family never gets sick, or they test negative for COVID-19, they must finish their 14-day quarantine.



*Sam was at school and football practice 2 days before he tested positive for COVID-19.*

The health department notified the school that Sam tested positive for COVID-19.

The health department will notify anyone who is at higher risk they were exposed to COVID-19. The school will notify anyone else who was exposed in the school or at football practice.



*The students who were exposed at school or football practice should quarantine for 14 days from the date of exposure.*

**Students cannot participate in extracurricular activities while on quarantine. Students who are quarantined are not allowed to go to football practice during their 14- day quarantine.**



*Any teacher, employee, or volunteer who was exposed at school or football practice should quarantine at home for 14 days from the date of exposure.*

Coaches, other employees, and volunteers who were exposed at football practice are not allowed to go to football until their 14-day quarantine is over.

Only those students, teachers, or employees who were exposed will be notified.



*The health department will notify the school when Sam has finished isolation and can return to school.*



# Daily Home Screening for Students

Parents: Please complete this short check each morning for each of your children. Should the answer be “yes” to any question 1-6, please have the child stay home and contact the school, review the backside of this form for next steps, and contact your child’s school.

## SECTION 1: Symptoms

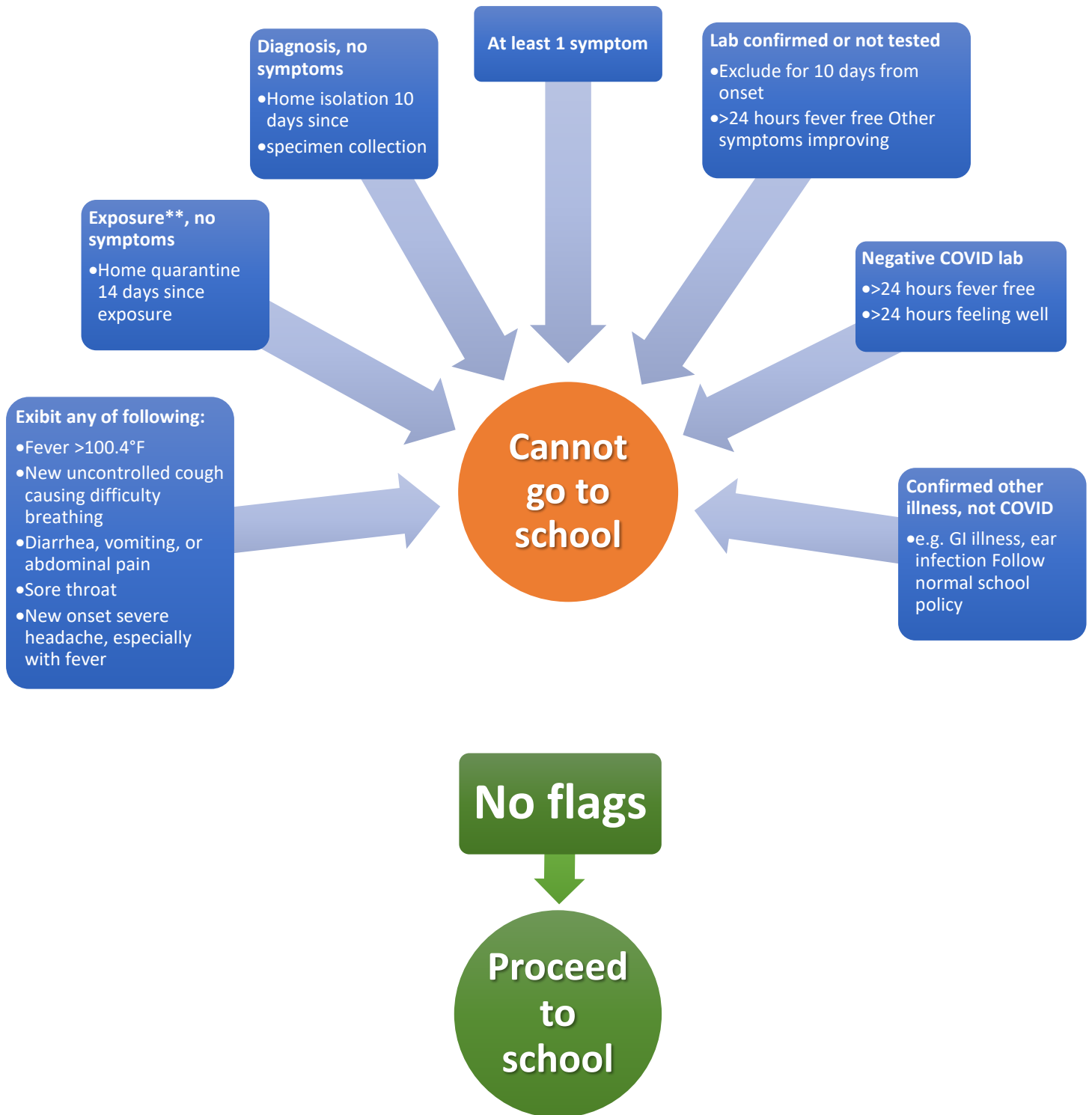
If your child has any of the following symptoms, it indicates a possible illness that may decrease their ability to learn and puts them at risk for spreading illness to others. Please check your child for these symptoms:

- ☐ *Temperature 100.4 degrees Fahrenheit or higher by mouth, or 100.0 degrees Fahrenheit or higher by no-touch thermometer.*
- ☐ *Sore throat*
- ☐ *New uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline).*
- ☐ *Diarrhea, vomiting or abdominal pain*
- ☐ *New onset of severe headache, especially with fever*

## SECTION 2: Close Contact/Potential Exposure

- ☐ *Had close contact (within 6 feet of an infected person for at least 15 minutes) with a person with confirmed COVID-19*
- ☐ *Traveled to or lived in an area where the local, Tribal, territorial, or state health department is reporting large numbers of COVID-19 cases as described in the Community Mitigation Framework*
- ☐ *Live in areas of high community transmission (as described in the Community Mitigation Framework) while the school remains open*

# Daily Home Screening Visual Guide\*



*\*Note: these are not necessarily all the most common symptoms of COVID but are adequate reasons to stay home. Some states using in-school screening use: fever, or chills, or shortness of breath, or new cough, or new loss taste/smell.*

*\*\* Exposure = close contact within 6 feet for 15 minutes of confirmed case; classroom cohorts may be classified as exposed.*

## Isolation Interview Form—Elementary Version

Name: \_\_\_\_\_ School/Grade: \_\_\_\_\_ Date: \_\_\_\_\_

**Use these questions to help guide the discussion.**

### Possible Exposure to Ill Individual:

1. When did you first start to feel like you were getting sick? \_\_\_\_\_
2. Have you been around anyone who has Covid-19 (sick) in the past two weeks?  
Yes/No Who? \_\_\_\_\_
3. What other children live with you or are staying with you? (List names, school, and grade level.) \_\_\_\_\_

### Possible Close Contacts Outside of Classroom:

4. Who do you talk to, or sit/stand near when you get to school?  
\_\_\_\_\_
5. When do you go to specials? What are they? \_\_\_\_\_
6. Who do you sit near or stand near at specials? \_\_\_\_\_  
\_\_\_\_\_
7. Who did you sit with at lunch the past couple of days?  
\_\_\_\_\_

### Transportation:

8. Do you ride the bus to school? Yes/No
9. If so, who do you hang around at the bus stop in the morning? \_\_\_\_\_
10. Do you ride the bus home from school? Yes/No
11. Who sits around you on the bus? \_\_\_\_\_
12. If you don't ride the bus how do you get to and from school? (If attending an after-school program record the name) \_\_\_\_\_
13. If a walker or car rider, ask if other student(s) ride/walk with them. YES/NO
14. If you wait to be picked up, who do you hang around?  
\_\_\_\_\_

### Outside Club/Sport Involvement

15. Do you go to any clubs, (i.e. boy scouts, girl scouts, drama)? Yes/No
16. If so what, when did you last go? \_\_\_\_\_
17. Have you been going to any sports practice? Yes/No
18. If so what type of sport and when did you last go?  
\_\_\_\_\_

## Isolation Interview Form—Secondary Version

Name: \_\_\_\_\_ School/Grade: \_\_\_\_\_ Date: \_\_\_\_\_

**Use these questions to help guide the discussion.**

### Possible Exposure to Ill Individual:

1. When did you first start having symptoms (feeling ill)? \_\_\_\_\_
2. Have you been around anyone who has Covid-19 (sick) in the past two weeks?  
Yes/No Who? \_\_\_\_\_
3. What other kids live with you or staying with you? (List names, schools, and grade level.) \_\_\_\_\_

### Possible Close Contacts Outside of Classroom:

4. Who do you talk to, or sit/stand near before school starts?  
\_\_\_\_\_
5. Do you hang out with anyone between classes? \_\_\_\_\_
6. Who did you sit with at lunch the past couple of days?  
\_\_\_\_\_

### Transportation:

7. Do you ride the bus to school? Yes/No
8. If so, who so you hang around at the bus stop in the morning? \_\_\_\_\_
9. Do you ride the bus home from school? Yes/No
10. Who sits around you on the bus? \_\_\_\_\_
11. If you don't ride the bus how do you get to and from school? \_\_\_\_\_
12. If a walker or rides in a car, ask if other student(s) ride/walk with them. YES/NO
13. If they get picked up, ask, "Do you hang around anyone while you wait to be picked up?"  
\_\_\_\_\_

### Outside Club/Sport Involvement

14. Are you in any school clubs? (i.e. school clubs, community events, etc )? Yes/No
15. If so what, when did you last participate? \_\_\_\_\_
16. Have you been going to any sports practice? Yes/No
17. If so what type of sport and when did you last go?  
\_\_\_\_\_
18. In the last few days have you hung out with friends face-to face? Who?  
\_\_\_\_\_



**PANDEMIC HEALTH COMMUNICATION FORM**

Student Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_  
Referred by: \_\_\_\_\_

**Student** - Student has the following signs/symptoms consistent with COVID-19. 10 days of isolation are required, unless otherwise directed by a medical provider, FL Department of Health, or PCPS Health Services. Symptoms began on \_\_\_\_/\_\_\_\_/\_\_\_\_ (Date).

	Temperature 100.4 degrees Fahrenheit or higher by mouth, or 100.0 degrees Fahrenheit or higher by no-touch thermometer.
	Sore throat
	<b>New</b> uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
	Diarrhea, vomiting or abdominal pain
	New onset of severe headache, especially with fever.
	Has child been around anyone with COVID-19 in the last 14 days Yes No

**Plan for Return:** The above named student may return to school when one of the following conditions is met.

\_\_\_\_ Option 1: Complete 10 days of isolation, student's symptoms have gotten better and they are fever free for 24 hours without the use of fever reducing medication. They may return to school on: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Date). MD note is not required to return to school.

\_\_\_\_ Option 2: (Medical Provider use only). Student has been cleared to return to school by a medical provider before completion of 10 days of isolation. The form must be returned to the school.

**Clearance to return to school – Medical Provider**

The above named student has been cleared to return to school on \_\_\_\_/\_\_\_\_/\_\_\_\_ (Date.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Sibling or household contact** - Student is a sibling of or a household contact of someone who is displaying symptoms consistent with COVID-19 or has a confirmed case of COVID 19. 14 days of quarantine are required, unless otherwise directed by a medical provider, FL Department of Health, or PCPS Health Services.

**Plan for Return – Sibling or household contact.** The above named student may return to school when the following condition is met.

\_\_\_\_ Option 1: Complete 14 days of quarantine. They may return to school on: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Date) MD note is not required to return to school.

Updated 8/18/2020

## What should you do if your child has symptoms of COVID-19?

### Could my child have COVID-19?

Common symptoms of COVID-19 are temperature (100.4 degrees F or higher by mouth or 100.0 degrees F or higher by no-touch thermometer, sore throat, new uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline), diarrhea, vomiting or abdominal pain, new onset of severe headache, especially with fever. Other symptoms include, but aren't limited to: fatigue, chills, muscle pain, congestion/runny nose, and new loss of taste or smell. Your child might have COVID-19 if they have any of these symptoms.

### Should my child get tested for COVID-19?

If your child has symptoms of COVID-19, or if they have been exposed to someone with confirmed COVID-19, contact your child's health care provider. Your child's healthcare provider may recommend COVID-19 testing. If your child does not have a healthcare provider, you may call the Florida Department of Health at 863-519-7911 and ask for an appointment to be tested. A referral is not needed. Typically, these tests are free of charge and the results are available in 2-3 days. You will need to tell them that your child attends a Polk County Public School as this expedites the process. Many commercial labs take 10-14 days to get the results.

### What should I do to keep the illness from spreading to my family and other people in the community?

- **Stay home, except to get medical care and isolate the child as much as possible.** Isolation is what you do if you have COVID-19 symptoms, or have tested positive for COVID-19. Isolation means you stay home and away from others (including household members) for the recommended period of time to avoid spreading illness. **Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis.**
- **Keep sick individuals separated from other people and animals in your home. Sick individuals should:**
  - As much as possible, stay in a specific room and away from other people.
  - Use a separate bathroom, if available.
  - Wear a cloth face covering when around others. If face covering can't be worn, other people should wear a face covering when they enter the sick person's room.
  - Restrict contact with pets and other animals while sick. When possible, have another member of the household care for animals. If a sick person must care for a pet, they should wash their hands before and after interacting with pets and wear a face covering, if possible.
  - Don't share personal items with people or pets, including dishes, drinking glasses,

cups, utensils, towels, or bedding.

- **Clean hands often.** Wash hands with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer that has at least 60% alcohol. Avoid touching your face with unwashed hands.
- **Cover coughs and sneezes with tissues.** Throw away the used tissues and then wash hands.
- **Clean “high-touch” surfaces every day,** including counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Use a household cleaning spray or wipe and follow the directions on the label.
- **Monitor symptoms.** Get medical help right away if symptoms get worse. Before getting care, call the health care provider and tell them that your child has COVID-19 symptoms. Put on a face covering before entering the health care facility to prevent the spread of germs to other people in the waiting room and exam rooms.

If your child has a medical emergency and need to call 911, tell the dispatch personnel that they have COVID-19 symptoms. If possible, put on face coverings before emergency medical services arrive.

### **How long does my child need to isolate?**

**If your child is confirmed or suspected of having COVID-19 and has symptoms, they can end home isolation when:**

1. They have been fever-free for at least 24 hours without the use of fever-reducing medication
- AND**
2. Their symptoms have improved, **AND**
3. At least 10 days have gone by since their symptoms first appeared.

**If your child is confirmed or suspected of having COVID-19 and have not had any symptoms, they can end home isolation when:**

1. At least 10 days have passed since the date of your first positive COVID-19 test, **AND**
2. They have had no subsequent illness.

**Your children may suspend isolation BEFORE 10 days if:**

1. They have a **negative** COVID-19 test **AND** they have had 24 hours fever-free without the use of fever reducing medication **AND** had 24 hours feeling well. A negative test result will be needed to return under this provision.
2. Their medical provider confirmed other illness not related to COVID-19 (ie. GI illness, ear infection, etc.) **AND** they had 24 ours fever-free without the use of fever reducing medication **AND** are feeling well. A doctor’s note will be needed to return under this provision.

### **What should everyone else in the household do?**

- **Isolation** is what you do if you have COVID-19 symptoms, or have tested positive for



COVID-19. Isolation means you stay home and away from others (including household members) for the recommended period of time to avoid spreading illness.

- **Quarantine** is what you do if you have been exposed to COVID-19. Quarantine means you stay home and away from others for the recommended period of time in case you are infected and are contagious. Quarantine becomes isolation if you later test positive for COVID-19 or develop COVID-19 symptoms.

### **Participation in a public health interview**

If your child tests positive for COVID-19, someone from public health will reach out to you, usually by phone. The interviewer will help you understand what to do and what kind of support is available. They will ask for the names and contact information of people you have been in close contact with recently. They ask for this information so they can let them know they might have been exposed. They won't share your name with close contacts when they reach out to them. In order to assist with COVID responsiveness in our schools, the school will provide information regarding close contacts, seating arrangements, and school schedules to the Health Department.

### **More COVID-19 Information and Resources**

**Have more questions about COVID-19?** Please reach out to:

***Florida Department of Health in Polk County***

State Call Center at 866-779-6121 (24/7)

Polk COVID-19 Information line at 863-519-7911 (M-F/8am-5pm)

***(Call the Polk COVID-19 information line above for free COVID-19 testing)***

***Polk County Public Schools, Mark Wilcox Center*** at 291-5355 (M-FR/8am-4:30pm)

Updated August 19, 2020

## What should you do if your child was exposed to someone with COVID-19?

If your child has been exposed to COVID-19, or think they have been exposed, you can help prevent the spread of the virus to others in your home and community. Please follow the guidance below.

### Symptoms of COVID-19

Common symptoms of COVID-19 are temperature (100.4 degrees F or higher by mouth or 100.0 degrees F or higher by no-touch thermometer, sore throat, new uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline), diarrhea, vomiting or abdominal pain, new onset of severe headache, especially with fever. Other symptoms include, but aren't limited to: fatigue, chills, muscle pain, congestion/runny nose, and new loss of taste or smell. Monitor your child for these symptoms.

### How does a person get exposed to COVID-19?

People can get exposed when they come into direct contact with the secretions (droplets) of someone who has COVID-19 (being coughed or sneezed on, kissing, sharing utensils, etc.). People often get exposed by a household member or through close contact with another person. Close contact means that a person has been within 6 feet of someone with COVID-19 for 15 minutes or more. Some people get COVID-19 without knowing how they were exposed.

### My child had close contact with someone who has COVID-19 but is not sick. What should I do?

Your child should self-quarantine for 14 days. This means that your child should stay home. They cannot go to work or school and should avoid public places for the entire 14 days. Monitor their health daily and check them for fever, cough, shortness of breath, and other symptoms listed above for 14 days from the last day they had close contact with the person that was positive with COVID-19. From the time of exposure, people who contract the virus can take 2 to 14 days to show symptoms. This is why people must self-quarantine for 14 days from last exposure. If a person is exposed to someone they live with and they cannot quarantine away from the person who is positive, their quarantine may last longer.

### My child had close contact with someone who tested positive for COVID-19 and now they are sick. What should I do?

If your child was exposed to COVID-19 and gets symptoms, they should self-isolate even if they have very mild symptoms. Self-isolation means that the sick person should stay home and away from others, including members of their own household. The child should have their own room with their own bathroom, separate from everyone else, if possible. If your child was a close contact to someone and now is ill, contact their health care provider and consider having them

tested. The Health Department offers free COVID-19 testing without a referral. Please, see contact information for the Health Department at the end of this handout. More guidance is available in the handout **What Should You Do If Your Child Has Symptoms of COVID-19**

### **What's the difference between isolation and quarantine?**

- **Isolation** is what you do if you have COVID-19 symptoms or have tested positive for COVID-19. Isolation means you stay home and away from others (including household members) for the recommended period of time to avoid spreading illness.
- **Quarantine** is what you do if you have been exposed to COVID-19. Quarantine means you stay home and away from others for the recommended period of time in case you are infected and are contagious. Quarantine becomes isolation if you later test positive for COVID-19 or develop COVID-19 symptoms.

### **Participate in a public health interview**

If someone with COVID-19 tells public health they have recently been in close contact with you, you may hear from us by text or phone call. An interviewer will help you understand what to do and what support is available. The interviewer will not tell you who gave them your name.

If you later become ill, they will ask you for the names and contact information of people you were recently in close contact with to notify them about exposure. They will not share your name when they reach out to them.

## **More COVID-19 Information, Testing, and Resources**

**Have more questions about COVID-19?** Please reach out to:

#### ***Florida Department of Health in Polk County***

State Call Center at 866-779-6121 (24/7)

Polk COVID-19 Information line at 863-519-7911 (M-F/8am-5pm)

***(Call the Polk COVID-19 information line above for free COVID-19 testing)***

***Polk County Public Schools, Mark Wilcox Center*** at 291-5355 (M-FR/8am-4:30pm)

## COVID-19 Surveillance Log

This log is to help keep track of anyone who presents to the isolation room with COVID-19 symptoms (see symptoms below) or students who are a Close Contact to a known case and become symptomatic during quarantine (as reported by parent while student is in quarantine).

Be sure to communicate any trends of symptoms, absences and actions taken with appropriate school district staff, as well as the local Health Department.

Health Services/FDOH RN: \_\_\_\_\_ Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Symptoms of COVID-19 may include, but are not limited to:

- a fever (100.4 degrees F or higher by mouth, or 100.0 degrees F or higher by no-touch thermometer)
- sore throat
- uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough from baseline)
- diarrhea, vomiting, or abdominal pain
- new onset of severe headache, especially with fever.

In addition to the ones above that were flagged by the Florida Department of Health, a child may experience shortness of breath, fatigue, muscle or body aches, loss of taste or smell, congestion, and runny nose. (Always check CDC's website for the most updated list of symptoms.)

*Students sent home with symptoms are to be in isolation for 10 days. Day 1 begins the day after they become symptomatic. They may return when they are:*

**Fever free for 24 hours AND all symptoms are improved AND ten days have passed since symptom onset.**

*Students who are close contacts are to be in quarantine for 14 days. Day 1 begins the day after they their last day of contact with a contagious person. Examples on next pages provided by the CDC.*

## Scenario 1: Close contact with someone who has COVID-19 —will not have further close contact

I had close contact with someone who has COVID-19 and will not have further contact or interactions with the person while they are sick (e.g., co-worker, neighbor, or friend).

Your last day of quarantine is 14 days from the date you had close contact.

Date of last close contact with person who has COVID-19 + 14 days = end of quarantine



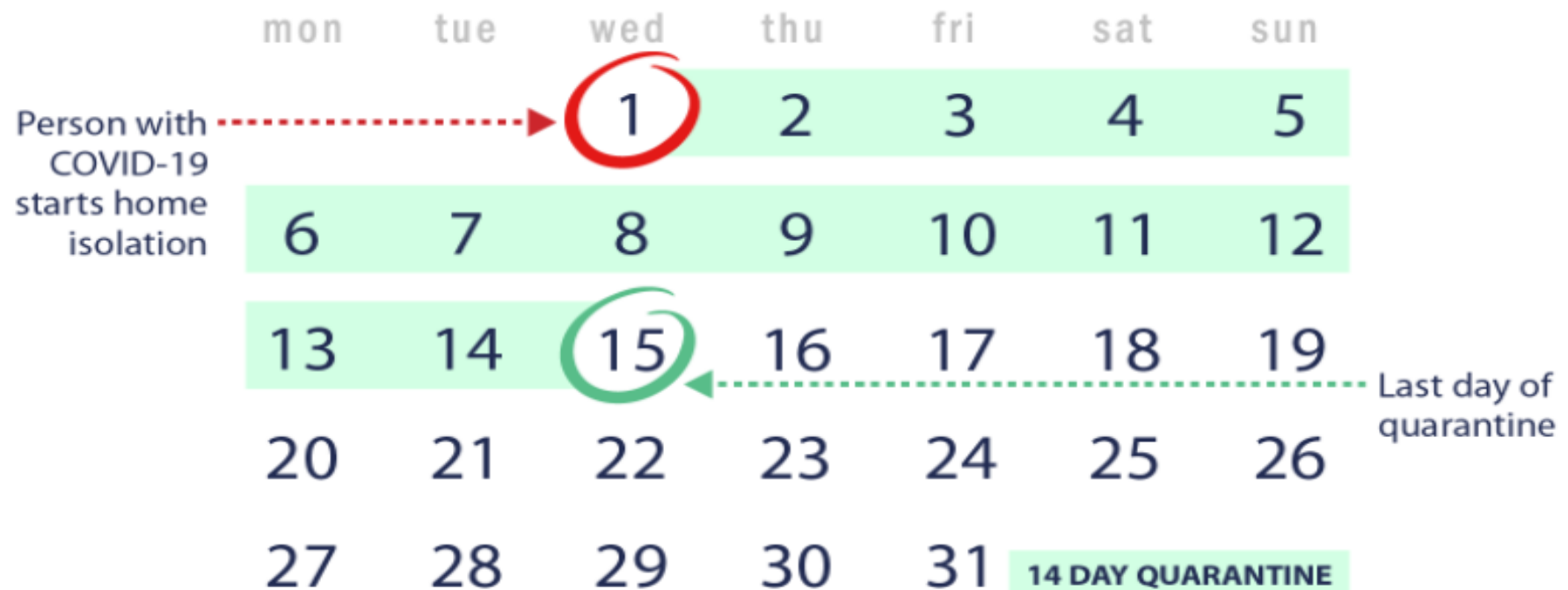
*Please note if your quarantine starts at noon on day 1, then it would end at noon on the last day.*

## Scenario 2: Close contact with someone who has COVID-19 —live with the person but can avoid further close contact

I live with someone who has COVID-19 (e.g., roommate, partner, family member), and that person has isolated by staying in a separate bedroom. I have had no close contact with the person since they isolated.

Your last day of quarantine is 14 days from when the person with COVID-19 began home isolation.

Date person with COVID-19 began home isolation + 14 days = end of quarantine



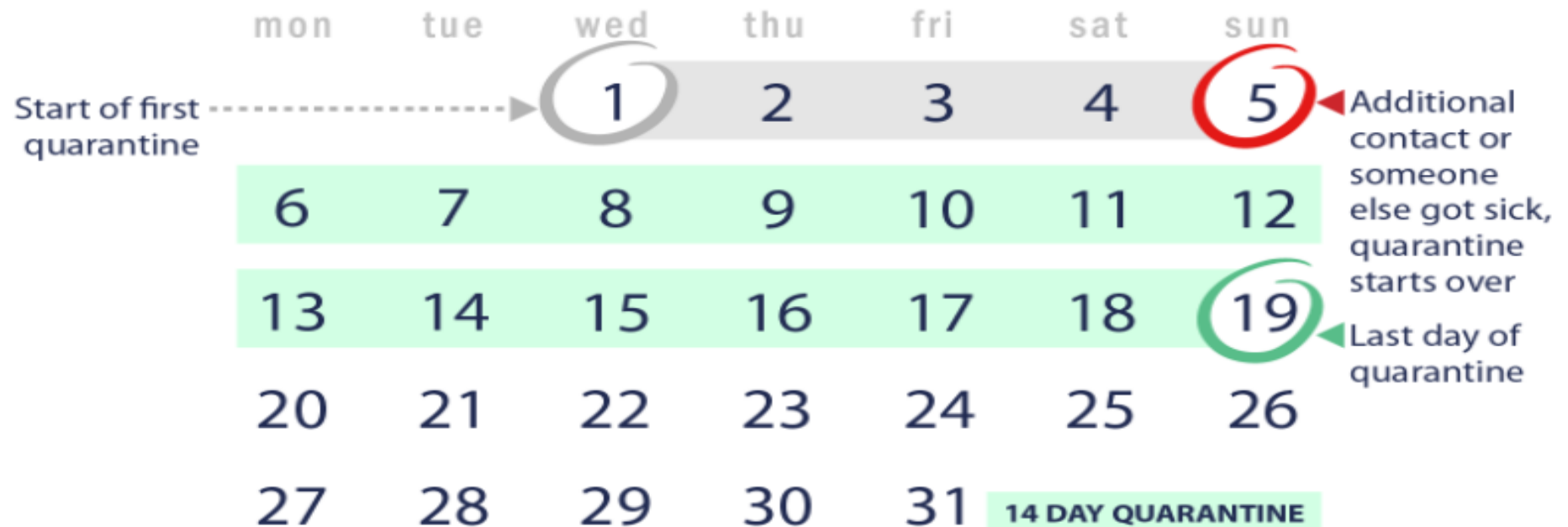
*Please note if your quarantine starts at noon on day 1, then it would end at noon on the last day.*

## Scenario 3. Under quarantine and had additional close contact with someone who has COVID-19

I live with someone who has COVID-19 and started my 14-day quarantine period because we had close contact. What if I ended up having close contact with the person who is sick during my quarantine? What if another household member gets sick with COVID-19? Do I need to restart my quarantine?

Yes. You will have to restart your quarantine from the last day you had close contact with anyone in your house who has COVID-19. **Any time a new household member gets sick with COVID-19 and you had close contact, you will need to restart your quarantine.**

Date of additional close contact with person who has COVID-19 + 14 days = end of quarantine



*Please note if your quarantine starts at noon on day 1, then it would end at noon on the last day.*

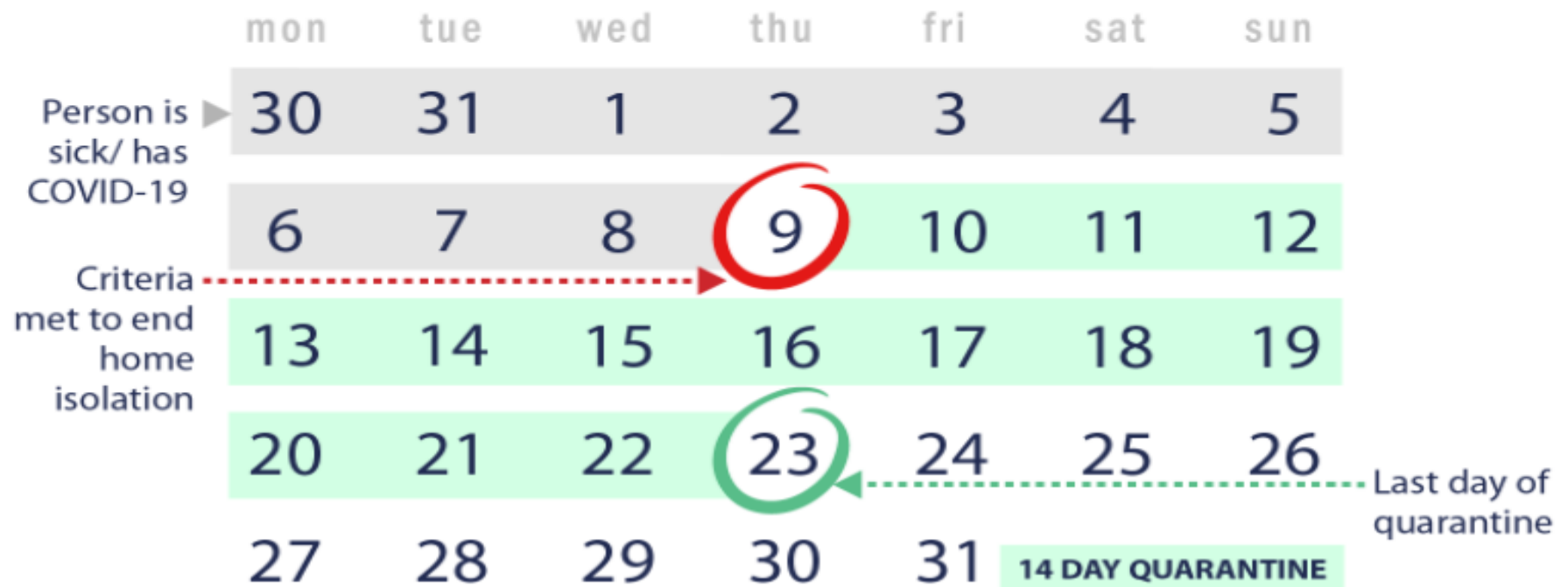


## Scenario 4: Live with someone who has COVID-19 and cannot avoid continued close contact

I live in a household where I cannot avoid close contact with the person who has COVID-19. I am providing direct care to the person who is sick, don't have a separate bedroom to isolate the person who is sick, or live in close quarters where I am unable to keep a physical distance of 6 feet.

You should avoid contact with others outside the home while the person is sick, and quarantine for 14 days after the person who has COVID-19 meets the [criteria to end home isolation](#).

Date the person with COVID-19 ends home isolation + 14 days = end of quarantine



*Please note if your quarantine starts at noon on day 1, then it would end at noon on the last day.*

## School Health Clinic COVID-19 Tracking Log

**This log is to help keep track of anyone who presents to the clinic/isolation room with COVID-19 symptoms (see symptoms below) or is sent home due to being a close contact of someone who has tested positive for COVID-19.**

[illegible]