

Planning for a case of COVID-19 in your school will help ensure that everyone knows what to do if a case is identified. This document is meant to help your COVID-19 Coordinator and Workgroup think through what to include in your health and safety plan and protocols. It contains general guidance for considerations, but it is not comprehensive and will not have information for every situation that may arise. Schools should reach out to their school district’s school nurse leadership or COVID-19 Coordinator/Workgroup with any questions. The Vermont Department of Health has a team of public health professionals available to schools to answer health related questions. Call 802-863-7240 and select the option for “Schools and Childcare Providers.”

Review [A Strong and Healthy Start](#), developed by the Agency of Education and the Vermont Department of Health, for more detail, information and guidance to help schools.

Visit the Department of Health’s [PreK-12 Schools](#) COVID-19 web page for routinely updated guidance documents and resources.

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Staff training and education

Make sure staff are educated about **general COVID-19 information**. Provide resources or training to staff so they understand the basics of the disease.

- www.healthvermont.gov/covid-19 is the most comprehensive source of COVID-19 information for Vermonters.
- There are many other illnesses that can have symptoms like COVID-19, but only those people who have received a [positive laboratory test](#), or are deemed a [probable case](#) by public health staff, are considered to have COVID-19.
- People with COVID-19 have had a wide range of symptoms. People with these [symptoms](#) may have COVID-19: 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.
- Symptoms can range from mild or no symptoms to severe illness.
- Certain people are at increased risk for severe illness such as [older adults](#) and [people with underlying medical conditions](#).
- The virus is thought to be spread mainly from person to person by respiratory droplets created when an infected person coughs, sneezes, or talks. These droplets are most infectious between people who are in [close contact](#) with one another.
- People infected with COVID-19 are infectious (contagious) starting two days before they become symptomatic – or for people who didn't have symptoms, two days before they got tested – and continues until they are [recovered](#).
- The incubation period, or the time from when someone is exposed to the virus to when their symptoms begin, is 2 to 14 days.
- [The Health Department FAQ page](#) provides an easy way to search for information on a variety of topics related to COVID-19.
- If a student, staff member, or anyone else who visited the school tests positive for COVID-19 but was not in the school while they were infectious, no additional actions are necessary as others are not at risk of being exposed at the school.
- See how long it takes for people who have been exposed to COVID-19 to potentially get sick in these quick visual timelines: [people with COVID-19 with symptoms](#), [without symptoms](#), and [close contacts](#).

Everyone is at risk for getting COVID-19 regardless of their race or ethnicity. Fear and anxiety about the virus can cause people to avoid or reject others even if they are not at risk for spreading the virus.

Create a plan

Having a plan and related health and safety protocols will help keep everyone on the same page about what they can do. The plan and protocols should be distributed to staff and kept in a centralized location so it can easily be accessed and revised. The sections below can help you form a plan.

Make sure protective supplies are adequately stocked and accessible.

Guidance regarding Personal Protective Equipment (PPE) for school nurses and other health professionals in the school building is posted on the [Vermont Department of Health website](#). School nurses will need to determine appropriate PPE based on the care and tasks required.

Schools should make sure they have an adequate supply of the following:

- Soap
- Hand sanitizer (at least 60% alcohol)
- Paper towels
- Tissues
- Cleaning and disinfection supplies
- Masks/facial coverings (as feasible)
- No-touch/foot pedal trash cans
- No-touch soap/hand sanitizer dispenser
- Disposable food service items

How will your school track protective supplies?

- Create an easy way to track how many supplies you have and how many have been used or how often they need to be replaced. This can help you determine when to order more and help you have enough on hand as needed.

How will your school order more supplies?

- Include in your plan where you will obtain additional supplies. Including more than one source is helpful in case supplies are back ordered or out of stock.

How will your staff know where to find supplies within the school if they need them?

- If a staff member or student needs masks/facial coverings, gloves, or another protective item, make sure they know how to easily find them. Consider putting some stock in high traffic areas.

Consider where to put hand sanitizer.

Washing with soap and water for 20 seconds is the best method for cleaning hands, but it may not always be feasible. Place hand sanitizer that contains at least 60% alcohol in areas where hand washing is not readily available.

Where should you put hand sanitizer?

- Think about what places in your school are high traffic areas where people may be touching many surfaces, such as in a classroom or handrails in stairwells. Consider having sanitizer near doorways into classrooms and entrances to buildings. Hand sanitizer stations should be on/near playground equipment.

Hang posters and signs.

Having posters and flyers with messaging and pictures can help remind people what steps they can take and why they are being asked to take them. Take into account the reading level of those at the school so that the posters you choose are effective.

Where should you put posters?

- Place posters and flyers around the school reminding students and staff the importance of wearing a mask/facial covering, washing hands, and physically distancing themselves from others. Resources are available from the [Vermont Department of Health](#) and [CDC](#).

Where should you put signs?

- Signs should be put up to clearly mark specific areas (isolation area, screening area, where to stand/sit to ensure appropriate physical distancing, etc.). They can also be put up to indicate areas where there is one-way traffic, such as in a hallway or on doors to indicate which doors are for entering and exiting.

Identify an isolation area.

If a student becomes sick while at school, they will need to be isolated away from others as soon as possible. Determine what can be used as a short-term isolation area.

For more information on natural ventilation see the [Strong and Healthy Start Guidance](#).

What should the isolation area be?

- Schools must have separate isolation spaces (areas must be structured with a door and allow for ventilation to the outside) to serve as an extension of a Health Office to accommodate symptomatic students and staff. Ensure symptomatic students are wearing a surgical mask and immediately isolate them in the designated space at school and send them home as soon as possible. Set up separate, well-ventilated triage areas and place student/staff who becomes ill with fever, cough, sore throat, or other respiratory symptoms at school in an isolation room. Make sure that confidentiality is maintained for anyone who enters/departs the isolation room.
- If multiple symptomatic people must be placed in the same isolation room, ensure that the symptomatic people are wearing masks and maintain at least 6 feet of distance between them.
- Where feasible, the school nurse's office/isolation room should:
 - Have a dedicated HVAC system
 - For more information, see the [Safety and Health Guidance FAQ 8: HVAC](#).
 - Have a dedicated restroom (ideal)
 - Have exhaust directly outdoors
 - Maintain negative pressure to adjoining spaces
 - Nurse office suite design should follow health care facilities design practices as described in standards such as ASHRAE Standard 170 and other applicable guidelines and design information.
 - For more information see [ASHRAE Epidemic Taskforce Schools & Universities](#).

How can you communicate with students and parents/caregivers about the area before it is used?

- Communicate with staff, students, and parents/caregivers the need for an isolation area and when it will be used. Go over the process of bringing a student to the area and what steps will be taken. To reduce stigma and panic, make sure that staff, students, and parents/caregivers know that if someone has been taken to the isolation area, they are there out of an abundance of caution, and **they do not necessarily have COVID-19**.

How should the isolation area be cleaned?

- The isolation room should be cleaned and disinfected following each use with special attention to frequently touched surfaces. This should happen as soon as practical—there is no need for delay.

Work to keep COVID-19 from entering your school.

Symptom checks can help identify possible cases early but may not keep COVID-19 out completely. Children are more likely than adults to be asymptomatic or pre-symptomatic (have not yet developed signs or symptoms) and to have mild symptoms. This means that some children who have COVID-19, who can potentially transmit it to others, may not be identified. This highlights the importance of implementing prevention strategies such as wearing a mask/facial covering, physically distancing, and frequently washing hands.

For more specific information on facial coverings in the school environment, see [Safety and Health Guidance FAQ 5: Cloth Face Masks and PPE](#).

Symptom screening will only identify that a person may have an illness, not specifically COVID-19. **Many of the symptoms of COVID-19 are also [common in other childhood illnesses](#), like the common cold, the flu, or seasonal allergies.**

The Health Department has information and guidance on when and how long to exclude students and staff for common illnesses. See the [Immunizations & Infectious Disease](#) page.

When will you exclude staff or students from in-person school activities or sports?

Students and staff should be excluded from in-person activities if they:

- Show [symptoms](#) of COVID-19, or
- Have been in close contact with someone with COVID-19 in the last 14 days and are quarantining, or
- Have a fever (temperature greater than 100.4 °F), or
- Are currently quarantining due to out of state travel, or
- Are currently in isolation due to testing positive for COVID-19

Students and staff should be excluded from school until they are no longer considered infectious. The student or staff member's health care provider may be consulted to help determine what medical course to take (e.g., whether or not they think COVID-19 testing may be necessary).

[COVID-19 Information for Families Return to School Following Illness](#) provides information on return to school recommendations. This resource is intended for use between school nurses and other health care professionals.

What health screenings will you ask students and staff to have done and how will that information be communicated to your school?

The purpose of symptom screening is to identify people who may have COVID-19 and exclude them from a setting to reduce the risk of transmission to others.

There is no single symptom that is uniquely predictive of a COVID-19 diagnosis. For example, not everyone with COVID-19 will have a fever.

- All students/their families and staff should conduct daily monitoring for COVID-19 exposure and symptoms. Schools may choose to ask students/staff to do symptom monitoring at home or when boarding the bus prior to entering the school building.
- Health screening questions to answer:
 - Has the student or staff member been in close contact with a person who has COVID-19 within the past 14 days? Close contact is being within 6 feet of an infected person for 15 minutes or more over a 24-hour period.
 - Does the student or staff member have any [symptoms of COVID-19](#)?
 - Has the student or staff member traveled out of the state? See the [ACCD Cross State Travel Information](#) for the most recent travel information.
- **Students who have COVID-19 exposure or signs/symptoms of COVID-19 must not come to school or must be returned to their parents/caregiver as soon as possible.**
- Determine how your school will collect this information and what will be done to make sure all students attending school that day have had screening information sent to the school.

When will you perform temperature screenings?

- Schools should conduct temperature screening of students. This should occur at the first point of contact. If it is not feasible on the bus, then it should be conducted on entrance to the school. If staff conduct temperature screening at home, they should report this information daily. Estimate how many students, staff, parents/caregivers, or other people come to the school each day to determine how many thermometers are needed. Any staff taking temperatures should be trained on the process to ensure standardization. Consider where those waiting to enter the building will wait, keeping in mind physical distancing and weather concerns.
- Daily temperature screenings must also be conducted on staff; these can be conducted at school or at home and should be reported daily. Follow manufacturer instructions, and please note that non-contact or scanning thermometers do not register properly in cold temperatures.
- Create a plan for documenting, communicating, and acting on a fever when measured.

What will be your process to follow-up if parents/caregivers do not report screening results?

- Schools must communicate with parents/caregivers so that plans are put in place if students are symptomatic upon boarding the bus or upon entry to the school.

What training will be provided to school staff regarding how to have conversations with parents/caregivers about home symptom screening?

- Have a standard process to review each student’s daily symptom screening and review this process with staff.

Consider having staff roleplay temperature checks and potential conversations with parents/caregivers so they are more comfortable with the process and how to communicate.

What will you do if a student arrives at school sick?

- Student who come to school sick should be sent home as soon as possible. Anyone who has symptoms should immediately put on a surgical mask if they are not already wearing one. While they are waiting, they should stay in the designated isolation area. Talk to parents/caregivers prior to school starting to let them know your policy.

What if a student or staff member needs to commute to school from outside Vermont?

- Daily commuting to school/work from counties outside of Vermont is considered essential travel; quarantine rules do not apply. However, staff and students who engage in such essential travel should take all other COVID-19 precautions. Staff and students who live in border communities should note that not all of the cross-border travel they would typically engage in is considered essential travel. Please consult the Agency of Commerce and Community Development (ACCD) [Cross State Travel Information](#) page for more information.

What if a student or staff member travel over a holiday or weekend for nonessential reasons?

- Students and staff who travel out of state over a holiday break or weekend for nonessential reasons need to quarantine. See the ACCD [Cross State Travel Information](#) page for more information.
- School leadership is encouraged to remind families and staff about travel quarantine requirements prior to holidays or weekends so appropriate steps can be taken to make plans.

Work to identify symptomatic people early.

Students and staff may develop symptoms while at school, so it is important to work with staff to identify students who may have an infectious disease early and to impress upon staff the importance of immediately informing the COVID-19 Coordinator or school nurse of any developing symptoms. More steps are listed below in [“What to do when a student or staff member becomes symptomatic at school.”](#)

- Ensure all staff know the signs and symptoms of COVID-19.
- Train staff on how to respond if someone may have COVID-19.

Communicate your plans to staff and parents/caregivers.

To keep everyone on the same page and ease the minds of parents/caregivers, students, and staff, communicate as much of the plan as possible so they understand how you will be keeping students and staff safe. Include in your communication how you will share additional information and updates.

Consider putting plans, information, and updates on a website where it can easily be seen and updated.

Test communication capacity to make sure you can easily reach staff, students, and families with important information. Consider developing a communication plan to be implemented in the event of an outbreak.

Consider students with special health and education needs.

Students with **chronic conditions** may, as part of their condition, have symptoms like cough or nasal congestion without having COVID-19. Symptom screening may result in the potential to exclude some students repeatedly from school even though they do not have COVID-19 or an infectious disease.

Families should work with school nurses and their primary care provider or health care team around individual situations.

Students with documented allergies or well-controlled asthma do **not** require a medical clearance note from their health care provider to enter school. However, a student with a new diagnosis of asthma during the school year **does** require written confirmation from the student's health care provider.

If students with chronic conditions develop new symptoms, they should be sent home and their provider should be consulted.

Students who have a medical or behavioral reason for not wearing a facial covering should not be required to wear one. These decisions should be made in partnership with the health care provider and school nurse. Review [Guidance on Mask Exemptions in Children and Adolescents](#) for the rare conditions that allow children or adolescents to qualify for a mask exemption. The guidance was developed from the Health Department, University of Vermont Children's Hospital, Vermont Child Health Improvement Program and Vermont Chapter American Association of Pediatrics.

Plan for absenteeism.

How will your school plan for staff absenteeism?

- Review sick leave policies with staff and encourage them to stay home if they are sick.
- When possible, allow staff to stay home to care for sick family members.
- Identify crucial job functions and position and plan for alternative coverage by cross-training.
- Work on determining what level of absenteeism will disrupt continuity of teaching and learning.
- Determine a plan for how immediate coverage will be provided if a teacher needs to leave in the middle of the day.

How will your school plan for student absenteeism?

- Review attendance policies and encourage students to stay home when they are sick, even without documentation from doctors.
- Discourage the use of perfect attendance awards or incentives. Students should not feel they will be penalized if they need to miss school due to sickness or due to being a close contact to someone with COVID-19.
- Alert the Health Department about any large increases in student or staff absenteeism, particularly if absences appear due to respiratory illnesses. You can reach the Health Department by calling 802-863-7240, option 3 during business hours or option 7 after business hours.

Everyday actions to take

- All staff and students of all ages are required to [wear a face mask/facial covering](#) while in the school building at all times and outside around the school building if adequate physical distancing of at least 6 feet cannot be maintained.
 - Face masks should not be placed on children younger than 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

- If teachers are working with students who are unable to wear a face mask, the teacher can consider wearing a face shield along with their mask to help protect them against any droplets.
- Wash hands with soap and water for at least 20 seconds **before**:
 - Eating
 - Preparing food or drinks
 - Touching your face
 - Administering medication or medical ointment
 - Handling your mask/facial covering
 - Playing with sand and sensory play
 - Cleaning
 - Switching rooms or locations
- Wash hands with soap and water for at least 20 seconds **after**:
 - Arriving at school
 - Staff breaks at the school
 - Using the restroom or helping a child use the restroom
 - Blowing your nose, coughing, or sneezing
 - Handling your mask/facial covering
 - Caring for someone sick
 - Touching pets or animals or handling animal waste
 - Preparing food or drinks
 - Administering medication or medical ointment
 - Coming in contact with bodily fluids
 - Playing outdoors
 - Playing with sand and sensory play
 - Handling garbage
 - Cleaning
- Adults and adult staff within schools should maintain a distance of 6 feet from other adults as much as possible.
- Teachers and staff should maintain a distance of 6 feet from students as much as possible. However, brief periods of closer contact, such as when a student may need one-on-one guidance, clarification, or assistance are expected and permitted. In these cases, staff should stand/kneel/sit side-by-side students (rather than face-to-face) for brief amounts of time.
- Younger students (PreK through Grade 6) should be spaced at least 3 feet apart. This is considered a minimum distance.
- To the extent possible, older students (Grade 7 and up) should be spaced 6 feet apart. This is considered a minimum distance.
- When physical distancing is not possible, it is even more important for students and staff to adhere to the mask/facial covering requirement.
- Clean and disinfect frequently touched surfaces (see [“Cleaning”](#) information below).
- Monitor health daily and stay home if you are not feeling well.
- Cover coughs and sneezes with a tissue, then throw the tissue away and wash your hands.

Help staff, students, and families understand why these everyday actions are being asked of them and how each person contributes to keep themselves and their community safe and healthy.

- Avoid touching your eyes, nose, and mouth.

What to do when a student or staff member becomes symptomatic at school:

During the fall and winter, there are many illnesses going around as people spend more time indoors and in closer proximity to others. Flu season usually runs October – May and other respiratory infections may be seen during that time as well. There are likely going to be students who have symptoms while in school that are consistent with COVID-19 but may not be COVID-19. Taking everyday actions to reduce the spread of COVID-19 will also help reduce the spread of other infections.

Remember that not everyone with symptoms of COVID-19 will have the infection. There could be many other reasons for the symptoms. Following your plan will reduce alarm for students, staff, or parents/caregivers when someone has symptoms.

If a student develops a fever or any of the [symptoms of COVID-19](#), they should be placed in an isolation area separate from staff and other students until they can go home. Plan to send the students home immediately. If a staff member develops a fever or any COVID-19-like symptoms, they should return home immediately. Anyone with symptoms people should be wearing a surgical mask if they are able.

Once someone is sent to isolation, clean and disinfect all high-touch areas they potentially used, after they have left the classroom or other space that they were in. This should happen as soon as practical – there is no need for delay. This may include the student’s desk and chair, door handles, etc. (It will likely not be known whether they have a diagnosis of COVID-19 at this time). Isolation areas/rooms should be fully cleaned/disinfected no less than one hour after they have left the room.

How will you bring a student to the isolation area?

- Be sensitive to the needs of the student when they are being brought to the isolation area, make sure it is done in a non-threatening manner while explaining to them what is happening, so they understand. This can be a stressful and scary time.

How will the student get home?

- Prior to the start of the school year, reach out to parents/caregivers letting them know that if their student comes down with symptoms of COVID-19 while they are at school, the student will need to be sent home. No one who is symptomatic will be allowed to ride the bus, so parents/caregivers should have a plan for how they will get the student home if needed.

What to do when the Health Department informs you that someone with COVID-19 was at your school:

The Health Department takes public health action on both confirmed and [probable cases](#) of COVID-19. When the Health Department receives a positive COVID-19 test result of a student or staff member, and they determine that this person was in your school while they were infectious, the Health Department will reach out to your school administrators to let you know.

During the subsequent contact tracing process, if a student or staff member who tests positive is determined to have not been in school while infectious and thus there is not a transmission risk to the school community, the Health Department is not able to provide identifying information about the person to the school leadership due to confidentiality laws. Examples of these situations may be that the teacher or student were on vacation or were remote learning during their infectious period. However, the Health Department will notify the school about these positive cases in a way that does not contain identifying information.

The Health Department will work with you to determine where the students or staff member has been within the school and who they may have come into contact with.

What steps should your school take if someone with COVID-19 was in your school while infectious?

The [PreK-12 School COVID-19 Case Actions Checklist](#) provides a general list of what to expect and actions to take if there is a confirmed case of COVID-19 in your school,.

- Compile a [line list](#) of all the students and staff with whom the person with confirmed COVID-19 had close contact. A line list is a document to help identify the names and information of people who may have been exposed to the infection. The following items may help you create a line list:
 - Seating charts
 - Class schedules
 - Staff movement, including teachers, paraeducators, custodial staff, contractors and others
 - Bus seating charts
 - Attendance records
 - Activity participation records
- Schools will also be asked:
 - What is the contact information for the close contacts?
 - Have any of the close contact had symptoms?
- Work on a list of all the known locations in the school where the person who tested positive was for 15 minutes or more. This includes classrooms, school nurse's office, etc.
- Close off any areas used by the infected person for 15 minutes or more until [cleaning and disinfecting](#) have been done. This should happen as soon as practical – there is no need for delay.
- Open outside doors and windows and use ventilating fans to increase air circulation in the area.
- Clean and disinfect all areas such as classrooms, bus seats, offices, bathrooms, common areas and shared electronic equipment used by the person who tested positive, focusing especially on frequently touched surfaces.
- Ensure safe and correct use and storage of cleaning and disinfection products, including storing products securely away from children.
- Participate in contact tracing as requested by the Health Department.
- Communicate with staff and parents/caregivers with general information about the situation. It is critical to maintain confidentiality. Find a [template letter](#) to inform the school community of a confirmed case of COVID-19 on the [PreK-12 Schools web page](#). The letter is available in multiple languages.

Contact tracing

- If it is determined that a student, staff or teacher was infectious while in school, The Health Department will support schools with [contact tracing](#). School administrators will be asked to communicate directly with teachers, staff and families of the affected pod or classroom to provide them with quarantine guidance. The [template quarantine letter for students](#) is available on the [PreK-12 web page](#) and is available in multiple languages. There is also a [template quarantine letter for teachers and staff](#). Use these letters to inform anyone who was in close contact with the person with COVID-19 or anyone who needs to quarantine. The letters provide important information about what they need to do, when they should get tested, and when they can return to school or work.
- The Health Department is available to answer questions that families have about this quarantine guidance and will assist families in accessing services and supports, if needed. More details can be found in the [AOE memo](#).

Closing schools for in-person instruction

Other than under [Step I](#), **the decision to close schools or certain classrooms for in-person instruction will be made by the local superintendent or independent school head after consulting with the Department of Health.** The Department of Health epidemiologists will provide guidance based on a number of factors, including the level of community transmission, the number of students or staff infected, the status of contact tracing, the number of days the infectious person was at school, infection control policies and practices, the number and structure of classes/pods/ grades affected, and other opportunities for transmission (extra-curricular activities, etc.).

Decisions to close for in-person instruction will be determined on a case-by-case basis.

Superintendents consider many factors, beyond public health, in determining whether a class/pod/school will switch to remote instruction. Those factors may include availability of adequate workforce and the school calendar.

Cleaning

To ensure that all areas are routinely and thoroughly cleaned, include in your plan a list of all areas and items that need to be [cleaned](#) and a schedule for cleaning. Consider finding an alternative for any items that cannot easily be cleaned, such as soft toys or cloth items or cloth furniture.

At minimum, common spaces and frequently touched surfaces and doors should be cleaned and disinfected at the beginning, middle, and end of each day.

Ensure [safe and correct use](#) and storage of [cleaning and disinfecting products](#), including storing products securely away from children. More details are available in the [Strong and Healthy Start guidance](#).

You can search on the [EPA website](#) to ensure the disinfectant your school is using is effective against COVID-19. Products that contain ethanol, isopropanol (isopropyl alcohol), hydrogen peroxide, L-lactic acid or citric acid are preferred because they are safer for health and the environment.

See the CDC's website on [Cleaning, Disinfecting and Hand Hygiene in Schools – A Toolkit for School Administrators](#) for helpful handouts for teachers and school administrators.

How will you ensure proper cleaning gets done?

- Work with teachers, staff, and others who use cleaners and disinfectants to determine what items and locations in your school should be routinely cleaned.
- Train anyone who will be using a cleaning or disinfecting product to read instruction labels, to safely and appropriately use products, what PPE should be worn, where they can find PPE, and how to dispose of PPE.

Modify your current cleaning protocol to include additional frequently touched items. Include a schedule of how often or when each item or area should be cleaned and disinfected and by whom. Share this with all staff, teachers, and anyone else in the school who use cleaners and disinfectants.

What PPE should be worn while cleaning?

- Anyone cleaning or disinfecting should wear a mask or facial covering, gloves, and any additional PPE appropriate for the chemicals being used as indicated by the instruction label.

How will you clean and disinfect school buses?

- Practice routine cleaning and disinfection of frequently touched surfaces, including surfaces in the driver cockpit commonly touched by the operator.
- All buses must have an adequate supply of hand sanitizer.
- If there is a known case of COVID-19 or a symptomatic student that has been transported, please follow [CDC Guidance](#).

What parts of your school should be routinely cleaned?

- Common spaces and frequently touched surfaces and objects should be cleaned at the beginning, middle, and end of the day.
- Commonly touched surfaces and objects include
 - All surfaces, such as desks or chairs.
 - Desks that the same students sit at do not need to be disinfected multiple times a day.
 - Desks that students eat at should be cleaned with routine cleaner or soap and water following snack/mealtime.
 - Bathrooms
 - Frequently used electronic devices
 - Door handles and handrails
 - Items students place in their mouth, including toys

Returning to school

Returning to school for both staff and students who have been ill should be made on a case-by-case basis, taking into account their situation. There are many factors that can contribute to when someone can return to school (such as when they were tested). You can call the Health Department at 802-863-7240, option #5 to discuss situations and ask questions.

- If someone tests positive for COVID-19 and had symptoms, they may discontinue isolation when at least 10 days have passed since symptom onset **and** at least 24 hours have passed since resolution of fever without the use of fever-reducing medication **and** other symptoms have improved.
- If someone tests positive for COVID-19 and had **no** symptoms, they may discontinue isolation 10 days after the date of their first positive lab test.
- If someone did not have symptoms and they were a close contact of someone who tested positive for COVID-19, they should stay home for 14 days. They can get tested on day 7 and if they have no symptoms and test negative, they can end their quarantine.
- If someone is symptomatic and they test negative for COVID-19, they should stay home until their symptoms have improved and at least 24 hours have passed since resolution of fever without the use of fever-reducing [medication](#).
- Schools nurses and local child health professionals may use this [tool](#) or shared decision making about students returning to school.

Coping with stress

In partnership with mental health professionals, develop a process for staff and student re-entry check-ins, weekly well-being checks and, if staff can be appropriately trained, universal social and emotional screenings to identify students and staff who need support.

How can you help promote mental health wellness?

- Encourage staff members and students to talk with people they trust about their concerns and how they are feeling.
- Support students and staff to establish healthy routines during uncertain times.
- Consider posting signages to [local resources](#) and the [Employee Assistance Program \(EAP\)](#).

[Stigma, discrimination](#), or [bullying](#) may arise due to wearing or not wearing a mask or getting sick with COVID-19. Schools should have a plan to prevent and address [harmful or inappropriate behavior](#).

Remind parents and families to support each other. Here is some language you may use:

“Remember that we are all at risk of getting this virus. These “COVID-19 cases” are our friends and family, and we need to be understanding and supportive. People with COVID-19 often experience uncomfortable symptoms and emotional stress. Instead of participating in speculation or gossip, offer to help community members who are affected by quarantine. With creative action from all of us, we will get through this period of anxiety and disruption. We thank you for your investment in the health and wellbeing of our school community.”

Having resources available for staff, students, and parents/caregivers can help them handle these new situations. Here are some resources:

- [A Strong and Healthy Start: Social, Emotional and Mental Health Supports During COVID-19](#) (Vermont)
- [Coping with Stress](#) (Vermont)
- [Coping with Stress](#) (CDC)
- [Help Children Cope](#) (CDC)
- [Helping Children Cope with Emergencies](#) (CDC)

Terminology

Cleaning

Cleaning with soap and water removes germs, dirt, and impurities from surfaces and objects. Cleaning works by using soap (or detergent) and water to physically remove germs from surfaces. This process does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

Close Contact

This is someone who was within 6 feet of someone who tested positive for COVID-19 for 15 minutes or more over a 24-hour period, while the person who tested positive was infectious.

COVID-19

This disease can be referred to by multiple names: COVID-19, 2019 novel coronavirus, 2019-nCoV, SARS-CoV-2. The name COVID-19 comes from 'CO' for corona, 'VI' for virus, 'D' for disease, and 19 for the year it was first identified.

COVID-19 Positive

There are many other diseases that can have symptoms like COVID-19, but only people who receive a [positive laboratory test](#), or are deemed a [probable case](#) by public health staff, are considered to have COVID-19.

Contact Tracing

When a person tests positive for COVID-19, the Health Department reaches out to them to see who they were in close contact with while they were infectious. The Health Department then reaches out to all the contacts to give them information and talk to them about quarantining.

Disinfecting

Disinfecting kills germs on surfaces or objects. Disinfecting works by using chemicals to kill germs on surfaces or objects. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Exposure to COVID-19

Being in close contact with a person who has COVID-19 within the past 14 days.

Incubation Period

The time from exposure to the virus until the first symptoms develop.

Infectious Period

This is the time during which someone infected with COVID-19 has the potential to spread it to others. The infectious period starts two days (48 hours) before any symptoms begin, or for people who did not have symptoms, two days before they got tested and continues until they recover.

Isolation

[Isolation](#) is for people sick with COVID-19 (or who tested positive for COVID-19 but do not have any symptoms). These people should stay home and away from others until at least 10 days have passed since symptom onset **and** at least 24 hours have passed since resolution of fever without the use of fever-reducing medications **and** other symptoms have improved. People who do not develop symptoms should stay home and away from others until 10 days after the date of their first positive lab test.

Personal Protective Equipment (PPE)

Equipment worn to minimize exposure to hazards that cause injuries and illnesses. This includes such items as gloves, safety goggles, face shields, face masks etc. This equipment is meant to protect the person using it.

NOTE – Cloth face masks are intended to keep the person wearing the mask from spreading respiratory secretions to others when talking, sneezing, or coughing. Cloth face coverings may also protect the wearer.

Probable Case

A case of COVID-19 is considered “probable” if the person:

- tested positive on an antigen test and has symptoms of COVID-19 or epidemiologic evidence, or
- has symptoms of COVID-19 and is epidemiologically linked to a confirmed case of COVID-19.

The Health Department takes the same public health actions as if they were a confirmed case (confirmed means the person tested positive on a PCR test). This means that contact tracers conduct interviews with people who are considered probable cases, provide isolation guidance, and their close contacts are notified to quarantine. People who are considered probable cases are also encouraged to get a follow-up PCR test. If they test positive on a follow-up PCR test, they are only included once in the total case count. Read more [“What is a probable case?”](#) in the FAQs.

Quarantine

[Quarantine](#) is for people with no symptoms who were either in close contact with someone sick with COVID-19 **or** are returning to Vermont from out of state for anything other than essential purposes.