Reopening Schools

Ensuring Staff Safety and Translating Lessons from Healthcare

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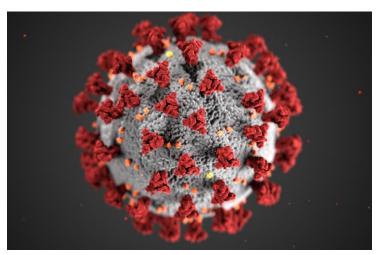




Conflict of Interest Disclosure

- Co-Director, Disaster Domain, Emergency Medical Services for Children Innovation and Improvement Center
- Consultant to Rubius Therapeutics regarding COVID 19 procedures
- Images used in this presentation were obtained from the public domain of the internet or are of actual health care staff.

March 2020

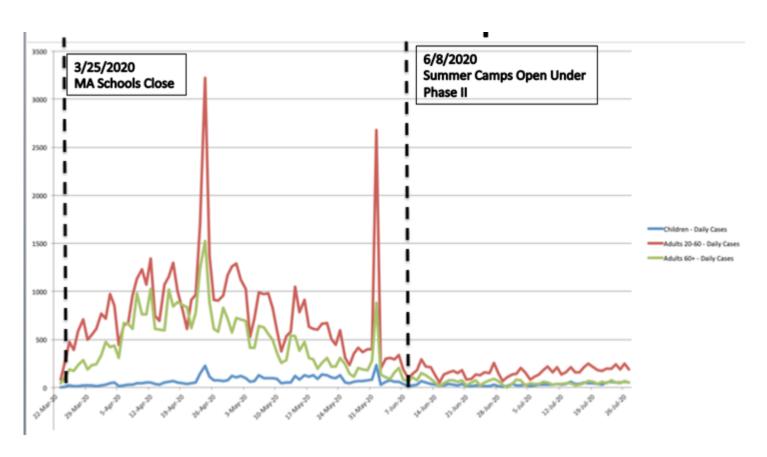




- Experience with prior outbreaks
 - 2009 H1N1 Pandemic
 - 2014-2016 Ebola
- Not business as usual
- Anxiety and fear
- Lack of data; changing guidelines
- Response: nimble and flexible

Fundamental Principal

Ensuring Staff Safety



Author: Benjamin Sommers MD PhD July 2020

Planning Principles

• Structure

Staff

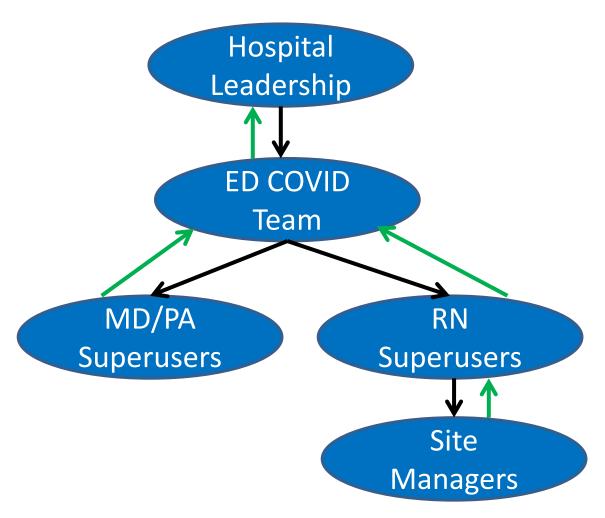
- Space
- Stuff







Structure: Education



Hospital Leadership:

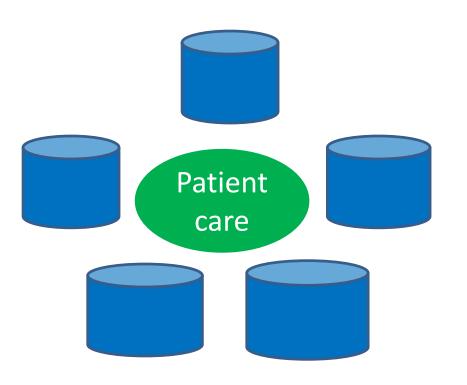
- Email updates (data)
- Weekly Open Town hall Meetings
- Leadership huddles
 Emergency Department
- Email updates
- Twice daily Huddles
- 24/7 Superuser presence

Tip:

 Do not send changes out after 5PM

Structure: Common Goals Breaking Down Silos

Pre-Covid Model

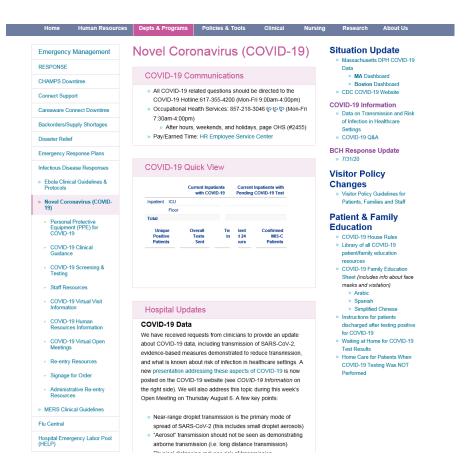


- COVID Model
 - Immersive Care
 - Coordinated Approach
 - Flexibility

Healthcare Team

Patient care

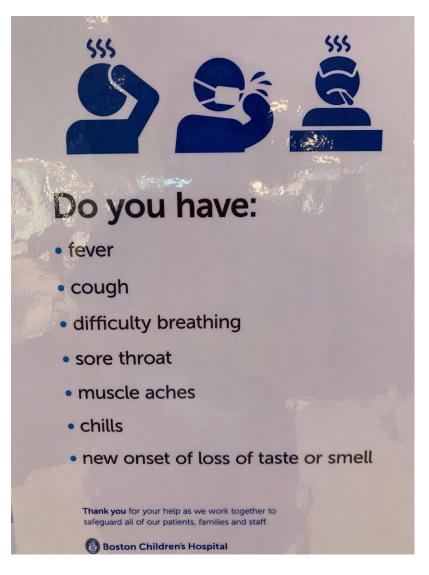
Structure: Protocols



- Testing, Cleaning, Infection Control, etc.
- Multidisciplinary Approach (public health, end users)
- Expect changes; Obtain feedback for improvement
- Data transparency
- Cleaning: indirect contact
 (via contaminated
 environment) can occur but
 only approx 6% of
 infections*

^{*}Dave Weber, SHEA Town Hall, July 2020

Structure: Culture shift to minimize Illness



- Staff and Children attestation
- Messaging to families keeping children home when ill
- Community vigilance



Structure: Staff Wellness and Mental **Health Needs**

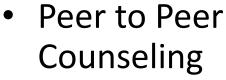
- Integrate Early
- Zoom parties (Zumba, Yoga, Gardening, Baking)
- Resource
- Counseling















Working From Home



Family Resources



COVID-19 Promotions





Staff-Decontamination Strategies





Full Personal Protective Equipment: Some of the time







Universal Masking Policy: All of the time

- Spread within healthcare settings is uncommon since universal masking was adopted.*
- Universal masking and eye protection reduce risk of transmission.*
- Healthcare providers with COVID 19 are overwhelming related to community spread.*
- Masking policy will decrease transmission of all respiratory viruses
- Cloths masks have been shown to reduce exposure to respiratory infections (multiple layers)







Stuff

- Supply Chain can be unpredictable
- Centralized <u>secure</u> locations to store PPE
- Other supplies such as voice projection may be needed







Children and COVID 19



rapid scoping reviewBMJ Paediatrics Open 2020;4:e000722. doi: 10.1136/bmjpo-2020-000722

Clinical Infectious Diseases hıvma MAJOR ARTICLE Characteristics of Household Transmission of COVID-19 Wei Li, Bo Zhang, Jianhua Lu, Shihua Liu, Zhiqiang Chang, Cao Peng, Xinghua Liu, Peng Zhang, Yan Ling, Kaixiong Tao, and Jianying Chen Background. Since December 2019, SARS-C

> Age-Related Differences in Nasopharyngeal Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Levels in Patients With Mild to Moderate Coronavirus Disease 2019 (COVID-19)

Taylor Heald-Sargent, MD, PhD1; William J. Muller, MD, PhD12; Xiaotian Zheng, MD, PhD12; et al JAMA Pediatr. Published online July 30, 2020. doi:10.1001/jamapediatrics.2020.3651



Month	Positivity rate for as asymptomatic patients
June-July 2020	0.43%

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- Children
 - Less likely to be infected
 - Less severe disease and hospitalizations
- Implications for school staff: Transmission higher from other adults than children



Conclusions

- #1 Priority is to ensure staff safety
 - School staff need to be at the table
 - Communication and Educational strategies
- There will never be zero risk (even with vaccine)
- Masks are key to reducing transmission (Children can do it!)
- Consider eye protection
- Let's look at the science together: Brookline School Public Health, Safety and Logistics Expert Advisory Panel



