

Hunterdon, Sussex & Warren County Health Departments
Regional Interim Guidance for PPE Use for School Nurses

7 28 2020

- A. The COVID-19 pandemic response is constantly evolving. As more information is acquired about the virus and as businesses and schools reopen in the community, guidance for safe reopening is vital. As we prepare for the reopening of schools in our county, one of the many areas to be addressed is the appropriate use of PPE within the scope of practice for school nurses.

Generally, PPE recommendations are based on the interaction between the medical care provider and patient. The Hunterdon County Health Department is providing districts with PPE recommendations from existing resources: The Center for Disease Control PPE guidance for outpatient settings (reference B), and from the National Association of School Nurses (NASN) (reference table C).

- B. The Center for Disease Control, CDC, issues guidance for outpatient settings. School Nurse Offices function similar to an outpatient primary care setting, however this guidance is for **reference only**, as the CDC states that it is only applicable in the healthcare setting and should not be applied in schools.

The CDC's PPE recommendations are based on patient interactions and broken into 2 categories:

1. Recommended routine infection prevention and control (IPC) practices during the COVID-19 pandemic: **eye-protection and surgical mask (an N95 is only used if an aerosol is generated.)** Generally, school nurses fall into category 1 of routine infection prevention and control practices.
2. Recommended infection prevention and control (IPC) practices when caring for a patient with suspected or confirmed SARS-CoV-2 infection: **Full PPE; N95, eye protection, gloves, gown.** School nurses would only fall into this category if caring for a patient with suspected infection.

Based on CDC guidance from July 15, 2020:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html

In addition to the proper use of PPE and surface disinfection:

- School nurses should seek to isolate and triage suspected COVID students, have them wear a face covering if applicable, and arrange for parent pick up to limit close contact with the nurse and other students.
- School nurses are advised to avoid engaging in any activity such as checking lung sounds or assessing the throat and ears when they know the child has symptoms of COVID.

C. The table below (Table C) has been released by the NASN. This PPE guidance is based on best-practice recommendations from federal authorities including the CDC and the United States Department of Labor, Occupational Health and Safety Administration. As the published scientific literature surrounding COVID-19 evolves, the following recommendations and guidance are subject to change:

PPE Types	Situation -- Lowest Risk	Situation – Moderate Risk	Situation -- Highest Risk	Notes:
	School personnel and students must interact, and physical distancing cannot always be maintained. **	Tasks include those that require close/direct contact with (i.e., within 6 feet of) people who are not known or suspected to have COVID-19.	Tasks include the physical assessment of any individual suspected of having COVID-19. Aerosol-generating procedures.	PPE should be used as a “last resort” when administrative or engineering controls are not able to eliminate the hazard. PPE is only effective if worn properly. Training on the types of PPE, how to properly put on/take off, the limitations and care instructions must be provided to employees who wear PPE.
Cloth Face Covering (Not PPE)	X			Provides source control, i.e. control that prevents transmission of potentially infectious respiratory droplets. These are not PPE.
Gloves		X – situation dependent	X	Wearing gloves is not a substitute for hand washing with soap and running water. Washing hands between patients/students will prevent cross contamination.
Eye Protection		X – situation dependent	X	Provides protection from fluid entry into eyes along with mouth and nose if worn with fluid resistant surgical mask.
Surgical Facemask		X	X	Provides source control and protection from fluid entry into the nose and mouth. As soon as possible and as tolerated, sick individuals should wear a surgical mask until they are picked up from school or leave to a health care facility.
Gown / Coveralls			X	Depending on product, may be resistant or impermeable to fluids. Needs to be changed between care for presumptive cases to prevent cross contamination.
Respirator (N95) *			X	Best practices prior to the COVID-19 pandemic was for healthcare workers to use N95 or greater protection respirators when in contact with patients who may spread infectious diseases via airborne secretions. If respirator is determined not essential, or is unavailable due to shortage, wear facemask and face shield.

Moderate Risk: Tasks include those that require close contact with (i.e., within 6 feet of) people who are not known or suspected to have COVID-19. These precautions are recommended since some people with the disease may be asymptomatic or in the pre-symptomatic phase of illness at the time of contact. Although there is risk with these tasks, not all PPE listed may be needed for all situations. These tasks include, but are not limited to first aid, oral medication administration, vision screening, hearing screening, consultation, blood glucose checks (diabetes care), metered-dose inhalers (MDIs) for students/staff with asthma.⁷

High Risk: Tasks that require close contact with (i.e. within 6 feet of) people who are not known or suspected COVID-19 patients but are undergoing procedures with potential for aerosol generation or body fluid contact, such as, but not limited to: open suctioning of airways, sputum induction, non-invasive ventilation (e.g., BiPAP, CPAP), manual ventilation. It would be advisable to do this assessment and any other airway procedures in a well-ventilated room isolated from others. Due to limited availability of data, it is uncertain whether aerosols generated by nebulizer treatments are potentially infectious. MDIs can be used as young as 6 months of age; families should contact primary care provider for education on use of MDI prior to school. During this COVID-19 pandemic, nebulizer treatments at school should be reserved for students who cannot use or do not have access to an inhaler (with or without spacer or face mask).⁸ Since some people can be asymptomatic with COVID-19 reasonable attempts should be made to reduce possible aerosol and respiratory droplet induction during care or treatment. Proper ventilation and cleaning of the room must be completed before using again.

School Setting Notes:

* To use N-95s schools must have a fit test program in place. If this is not in place or there is a shortage, a surgical face mask should be used.⁹ Some schools may have access to KN95 respirators that have been declassified and *not* suitable for highest risk tasks without a full-face shield.¹⁰ They may also be allowed as non-PPE per individual states.

** The use of cloth face coverings for students will be determined by multiple state and local stakeholders, public health data, and health accommodations.

*Face shields: A face shield is a form of PPE that provides eye protection. To provide the wearer full protection from respiratory droplets, it must be used with a facemask. The use of face shields is not a substitute for facemask or cloth face coverings.

*Eye protection: Goggles and face shields provide eye protection.³ Personal eyeglasses and contact lenses are NOT considered adequate eye protection.

According to the NASN, Healthcare Personnel (HCP) in schools include, but are not limited to, school nurses, designated health assistants, therapists, school-based health center personnel, clinical students and trainees, and other school personnel providing close contact interventions.

Because of the current shortage of PPE, the CDC recommends that use of specific types of PPE referenced in the NASN table below be limited to healthcare professionals (HCP.)

Links for Using PPE & Optimizing Supply:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>

Other helpful CDC Links:

<https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html>

National Association of School Nurses Guidance for HCP on PPE Use in Schools:

[https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-](https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/Guidance-for-Healthcare-Personnel-on-PPE-Use-in-Schools.pdf)

[215de278d256/UploadedImages/PDFs/Guidance-for-Healthcare-Personnel-on-PPE-Use-in-Schools.pdf](https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/Guidance-for-Healthcare-Personnel-on-PPE-Use-in-Schools.pdf)