



Health Matters

a monthly publication of the
Farmington Valley Health District
September 2021

Serving the towns of:

Avon
Barkhamsted
Canton
Colebrook
East Granby
Farmington
Granby
Hartland
New Hartford
Simsbury

From the CT Department of Public Health (DPH) and CT State Department of Education (CSDE):

Fall 2021 Back-to-School Guidelines

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Adapt, Advance, Achieve: Connecticut's Plan to Learn and Grow Together — Fall 2021



Updated Guidance for the Use of Mitigation Strategies in Connecticut's PreK-12 Schools

Connecticut State Department of Education



95 River Road
Canton, CT 06019
860-352-2333

[School Guidelines](#)

The plan for the 2021-2022 school year is to **return to full-time in-person learning**

Vaccination

- Vaccination is currently the most important and effective strategy for preventing COVID-19 infections and transmission in schools and other settings.

Mask Wearing

- The current DPH Commissioner's Order, which was incorporated by reference into Executive Order 13A, will remain in effect at least through September 30, 2021. This Order requires universal indoor mask wearing by all individuals, regardless of vaccination status "(i)nside PreK-12 public or non-public... school buildings... when students are present" as well as "inside licensed childcare facilities, including youth camps."
- Schools may choose to allow fully vaccinated teachers to remove their

masks when they are engaged in active instruction

Physical Distancing

- DPH recommends that schools continue their efforts to maximize distance between students to the extent feasible

Cohorting

- Although schools may no longer be required to cohort students, cohorting can still be a useful additional strategy in school settings

Ventilation

- Schools are encouraged to work with their HVAC contractor to explore any necessary and appropriate upgrades to their existing HVAC systems
- For schools without central mechanical HVAC systems, or where non-central components are also used (e.g., window units, open windows, air exhaust systems), these components should be used in such a way as to maximize the intake of fresh dilution air while minimizing significant air currents that blow air across the breathing zone of one individual toward another.

Contact Tracing, Isolation, and Quarantine

- CDC has included an exception in their definition of a close contact for students in a classroom setting. Students (not teachers or other individuals) within a classroom setting (not on buses or in other non-classroom settings) do not need to be considered close contacts if they are not within 3 feet of a known COVID-19 case for 15 minutes or more (cumulative over a 24- hour period), provided:
 - Contact between students happened exclusively inside a PreK-12 school classroom (e.g., no additional contact in a cafeteria, on a bus, during sports, outside of school, etc.)
 - Both parties were wearing a well-fitting mask consistently and correctly during the entire duration of their contact
 - The student who is considered to be a close contact remains asymptomatic
- Fully vaccinated students and staff who have had close contact with a known COVID-19 case but have no symptoms
 - Do not have to quarantine away from school or extracurricular activities (such as sports)
 - Should be tested 3-5 days after exposure but can continue with activities until such time as they receive a positive test
 - Should wear a mask when in public or otherwise engaged in activities with individuals outside of their household until they receive a negative test (or for 14 days with no test)
- Students and staff who are either unvaccinated, not fully vaccinated, or for whom vaccination status is unknown should follow current guidance for quarantine and testing prior to returning to school or other activities after close contact with a known case

Cleaning and Disinfection

- For the upcoming school year, and with CDC guidance, DPH advises that routine daily cleaning of schools (consistent with standard school cleaning practices), and regular daily (or more frequent if that represents past standard practice in schools) cleaning and disinfection of bathrooms, locker rooms, cafeterias, and health offices, is sufficient to prevent transmission of SARS-CoV-2 from surfaces in PreK-12 schools.

School Buses

- Passengers and drivers must wear a mask on school buses at all times
- DPH recommends improving ventilation on buses when they are occupied by allowing windows to be opened

Visitor Policies

- Nonessential visitors, volunteers, and external groups or organizations who wish to access school facilities during the school day must comply

with masking and other policies at all times, regardless of vaccination status

- Schools should not limit access for essential direct service providers (e.g., auxiliary student support services staff, student teachers and supervisors, information technology or facility repair staff, etc.) regardless of vaccination status

Cafeterias

- DPH recommends that schools maximize physical distance as much as possible between individuals moving through the food service lines and while eating (especially indoors)
- Given the very low risk of transmission from surfaces and shared objects, food services need not be limited to single use items and packaged meals

Recess and Physical Education

- In general, students and staff do not need to wear masks when they are engaged in activities outdoors

Arts Instruction and Performance

- DPH recommendations for the use of mitigation strategies for performing arts instruction and performance are largely unchanged from those recommendations that were in place during the prior school year for the start of the 2021 school year.
- Additional guidance forthcoming. General guidelines:
 - Moving activities outdoors when/where practical
 - Maintaining extended distancing (6 feet or more) between participants where increased respiration is likely (e.g., wind instruments, singing, high-exertion dance, etc.)
 - Implementing droplet control measures during activities with increased respiration (e.g., bell covers for wind instruments, masking during singing, etc.)

Athletics and Other Extracurricular Activities

- COVID-19 vaccination will be an extremely important tool to ensure that athletic programs and other extracurricular activities can continue to perform during the upcoming school year
- DPH recommends that unvaccinated individuals engaged in sports or other extracurricular activities continue to consistently and correctly wear a face-covering mask even in outdoor settings where close contact with other individuals is likely, where activities are likely to increase respiration and respiratory droplet generation, and/or in crowded settings
- Players, coaches, and other activity participants who are fully vaccinated do not need to quarantine or get tested following a known exposure to a COVID-19 case if they remain asymptomatic
- Schools should consider implementing screening testing for participants

Sports Guidelines

The **fall CIAC sports include**: the frequent direct face-to-face direct contact sport of football; the intermittent direct contact sports of field hockey, soccer, and volleyball; the infrequent direct contact sport of cross country; and the no direct contact sports of golf and swimming.

Vaccination:

- Advocating for vaccination of all eligible 12 year old+, encouraging athletic directors and sports organizers to work with DPH and/or LHD to sponsor vaccination clinics for kids and families.

Masks:

- CIAC policy follows [EO 13A](#) everyone must wear mask indoors regardless of vaccination.
- **Volleyball** – In alignment with current executive orders pertaining to mask requirements in school buildings, athletes, regardless of vaccination status, will wear masks for all indoor activities including active competition, practice, and all events around active play. If volleyball practices/training sessions occur outdoors, masks may be removed while in the outdoor setting. This follows practices implemented in the 2020-2021 school year for both girls' and boys' volleyball.
- **Swimming** – Athletes, regardless of vaccination status, will wear masks for all activities around active practice and competition, however, will not wear masks while in the water. Masks may be removed for outdoor dry-land training while athletes are actively conditioning.
- **Cross Country, Field Hockey, Football, Golf, Soccer** – In alignment with current youth sport recommendations, athletes, regardless of vaccination status, will not be required to wear masks during outdoor activities, practice, or competition. When indoors (e.g. locker rooms, indoor practice, classroom team/film session, weight room, etc.), mask should be worn in alignment with current executive orders pertaining to mask requirements in schools.
- **Sideline/Exhibition Cheerleading and Dance** – In alignment with current youth sport recommendations, athletes, regardless of vaccination status, will wear masks indoors. For safety purposes, masks may be removed indoors when performing stunts and put back on after the stunt sequence is completed. Outdoors, masks are not required while actively cheering, dancing, or stunting during halftime performances. Masks are not required while cheerleading on the sideline.
- **Officials** – Swim and volleyball officials will wear masks in alignment in Connecticut mask requirements inside school buildings. Cross country, field hockey, football, and soccer officials are not required to wear masks while officiating outdoor competitions.

Quarantine/Isolation:

- Fully vaccinated students/staff who are a close contact with a known COVID-19 case do not have to quarantine from sports or other activities, provided they remain asymptomatic after close contact with a known COVID-19 case (Interim Recommendations for COVID-19 Prevention in Connecticut's PreK-12 Schools, July 2021), and wear a mask until receiving a negative COVID-19 test (taken between days 3 and 5 from the date of contact) or 14 days without a test.
- Unvaccinated asymptomatic students who are a close contact of a known COVID-19 case will quarantine for 10 days (with a negative test between days 7 and 10) or 14 days without a test.
- Vaccinated and unvaccinated students who experience COVID-19 symptoms after close contact with a known COVID-19 case will quarantine for 10 days (with a negative test between days 7 and 10) or 14 days without a test.
- Weekly testing for unvaccinated athletes and coaches is recommended

Return to play after infection:

- In a covid19 positive child who is either **asymptomatic** or **mildly symptomatic** (<4 days of fever >100.4°F, short duration of myalgia, chills, and lethargy) should not exercise until they are cleared by a licensed medical provider. If no contraindications identified by provider, the patient may then begin a gradual return to play after 10 days have

passed from date of the positive test result and at least 24 hours without symptoms off fever-reducing medications. Written documentation of medical clearance for return to sport should be provided by the medical provider.

- Children with **moderate** symptoms of COVID-19 (≥ 4 days of fever $> 100.4^{\circ}\text{F}$, myalgia, chills, or lethargy or were in a hospital not an intensive care unit), should not exercise until they are cleared by a licensed medical provider. If cardiac evaluation is normal, gradual return to physical activity may be allowed after 10 days have passed from the date of the positive test result, and at least 10 days of symptom resolution has occurred off fever-reducing medicine. Written documentation of medical clearance for return to sport should be provided by the medical provider.
- For patients with **severe** COVID-19 symptoms (ICU stay and/or on a ventilator) or **multisystem inflammatory syndrome in children (MIS-C)**, it is recommended they be restricted from exercise for a minimum of 3 months. Cardiologist evaluation should occur. Written documentation of medical clearance for return to sport should be provided by the medical provider.
- Graduated return to play protocol outlined in document.

Spectators:

- Allowance for regular season spectator/fan attendance should align with DECD sector rules

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September is Emergency Preparedness Month!

Are you Ready?

As the COVID-19 pandemic continues to spread, hurricanes are tracked, and other weather event create power outages and flooding, we are all reminded that emergencies of all types and sizes can and do occur. No community or family is immune. Are you prepared?

If you had to evacuate, would you know what to bring?

If you had to shelter in place and lost power, would you have food and water for an extended period?

If you had to quarantine or isolate for up to 14 days, do you have enough food and provisions on hand at home?

Everyone should take simple steps to be prepared to stay safe during an emergency.

1. Get informed.

Learn about the emergencies that could impact your neighborhood, your town and your geographic region. For example, is your residential area prone to flooding during heavy rains? Does your neighborhood experience power outages? Understanding the potential risks can help inform how best you can prepare.

2. Make a plan.

Once you have identified the hazards or threats your community may face, identify activities that you will need to undertake should an emergency occur.

- Have important documents (birth certificate, social security card, home title or deed, medical information, important contacts, etc.) copied and stored in a fireproof safe. If you need to leave your home for an extended period, you may need these documents.
- If you take daily medication, you will need to ensure that you have

enough to last for a minimum of three days. If possible, try to arrange for seven days. Write down all doctors and pharmacy contact information and keep them with you.

- Know what to do if you are told to evacuate your home or business. Where would you go? Will your family know to meet you? Similarly, know what to do if you are told to shelter-in-place and not leave your home or business.

3. Get a kit / make a kit.

Build or buy a kit with various household supplies, food, water, medical/first aid supplies. You should have enough supplies to last for a minimum of three days. Remember to include pet food and pet medications if applicable.

Here is a recommended list of items to include in a basic emergency supply kit:

- Non-perishable food & manual can opener
- Water- 1 gallon per day per person (if you have a family of 4, you will need at least 4 gallons of water per day. Increase this if you also have pets)
- Battery-powered or hand crank radio and a NOAA Weather Radio with tone alert
- Flashlight & Extra batteries
- First aid kit
- Whistle to signal for help
- Dust mask to help filter contaminated air and plastic sheeting and duct tape to [shelter-in-place](#)
- Moist towelettes, garbage bags and plastic ties for personal sanitation
- Wrench or pliers to [turn off utilities](#)
- Local maps
- Cell phone with chargers and a backup battery
- Cash (ATMs may not be functional)

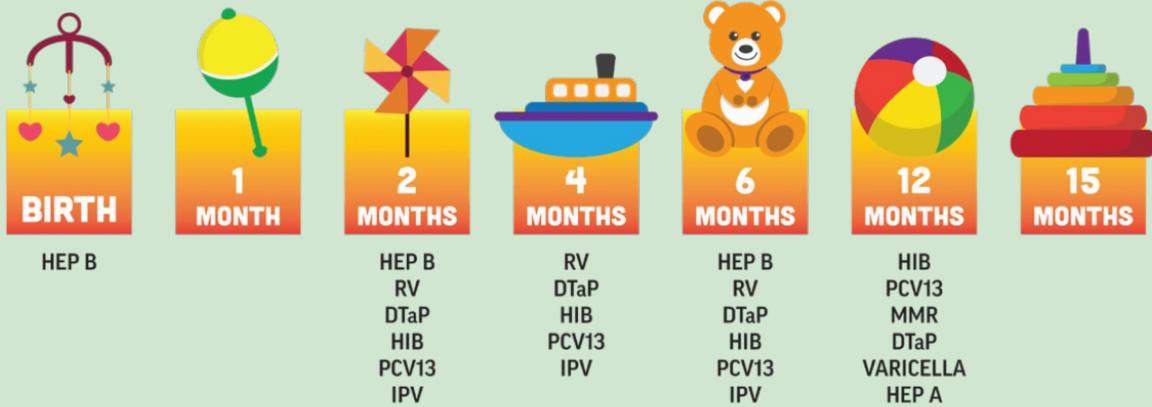
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By following these three simple steps, you can feel better about taking personal action to help prepare if a disaster were to occur. For more detailed information about each one of these steps, or to learn more about emergency preparedness, please click on the following links:

<https://www.ready.gov/build-a-kit>
<http://www.getreadycapitolregion.org/>
<https://beprepared.com/emergency-preparedness-plan-for-your-family/>



Keep Your Children Safe from Preventable Diseases - Stay Up to Date!



FLU after 6 months and every year after.



FLU after 6 months and every year after.

Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group
If your child has any medical conditions that put him/her at risk for infection or is traveling outside the United States, talk to your child's doctor about additional vaccines that they may need.

For the past 18 months, the world has not felt quite normal. We have gone from COVID-19 related lockdowns, to re-opening, to tightening up our protective measures again as we see the 4th wave of the pandemic gaining in the US. As a result, routine doctor visits and preventative screenings have often gone missed in the shuffle.

It is estimated that twenty-three million children worldwide are left overdue for their routine childhood vaccines by the COVID-19 response, according to the [World Health Organization](#). Routine child and adolescent vaccinations remain an important cornerstone of public health practice and is a critical frontline tool in the prevention of morbidity and mortality in children.

The Centers for Disease Control ([CDC](#)) report that pediatric outbreaks of vaccine-preventable diseases have the potential to derail efforts to reopen schools for the 2021-22 academic year and further delay nationwide efforts to return students to the classroom. Health care systems and other social institutions are already overburdened by the COVID-19 pandemic, and vaccine preventable disease outbreaks can lead to loss of in-person learning and further overwhelm communities.

Please consult with your child's pediatrician or school nurse to make sure that your child is up to date with their routine vaccinations. Likewise, get the annual flu vaccine in the fall and immunize them against COVID-19 when they are eligible. We all have a part to play in protecting not only our own families from preventable diseases, but those around us.

Keep Them Safe - Keep Them Learning - Keep Them in School

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Work-place Wellness



Did you know that according to the Centers of Disease Control and Prevention (CDC), full-time employed Americans spend on average 1/3 of their day, 5 days a week in their workplace? This is a considerable portion of a person's life! Providing healthy lifestyle choices and a supportive environment in the workplace can be beneficial to both the employee and the employer!

With more than 75% of health care costs in the US due to chronic health conditions – many of which are preventable-- the workplace becomes an especially important environment for adopting policies that promote good health and creating conditions that support healthy choices. There are very tangible benefits for employers as well. Studies have shown that promoting employee wellness can result in:

- Improved employee morale;
- Reduced employee turnover;
- Increased recruitment potential;
- Reduced absenteeism;
- Reduced healthcare costs;
- Improved employee health

Commonly asked Questions:

Q: Is it hard to provide a workplace wellness program in my small business? I only employ 5 people.

A: Any workplace can adopt a healthier work environment. FVHD makes this easy with our adaptable and accessible Workplace Wellness Program!

Q: Doesn't a workplace wellness program cost thousands of dollars? I can't afford to invest this in a program.

A: Promoting wellness in the workplace can be as easy as offering a break room with microwave and refrigerator to encourage healthy eating. It can be about adopting a healthy snack policy for meetings, a breastfeeding policy, providing flu shots, or creating walking clubs.

Q: How do I start?

A: Contact FVHD to learn more about our Workplace Wellness Program – it's as simple as a phone call! 860-352-2333

Providing a good work-life balance is essential to healthy, happy employees!

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Prevent Mosquito-Borne Illness!

Just because summer is coming to a close does not mean that mosquito season is over.

[West Nile Virus](#) (WNV) is endemic to our area. It is spread mostly via mosquito bites, but can also be passed person-to-person once someone is infected.

Most people infected with West Nile will not show symptoms, but about 20% will develop a fever with other symptoms such as headache, body aches, joint pains, vomiting, diarrhea, or rash. About 1 in 150 people may also develop a severe illness affecting the central nervous system such as encephalitis (inflammation of the brain) or meningitis (inflammation of the membranes that surround the brain and spinal cord)

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Help prevent the spread of West Nile Virus and other mosquito-borne illness.

- Dispose of plastic containers, ceramic pots, or similar water-holding containers that have accumulated on your property.
- Empty standing water from used or discarded tires that may have accumulated on your property, e.g., tire swings.
- Drill holes in the bottom of recycling containers that are left outdoors.
- Clean clogged roof gutters on an annual basis, particularly if leaves from surrounding trees have a tendency to plug the drains.
- Turn over plastic wading pools. Change water weekly.
- Turn over wheelbarrows and do not allow water to stagnate in birdbaths. Change water in birdbaths weekly.
- Aerate ornamental pools, stock them with fish or use mosquito dunks.
- Clean and chlorinate swimming pools that are not being used OR use mosquito dunks. Be aware that mosquitoes may breed in water that collects on swimming pool covers.

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On August 31, 2021, The Connecticut Department of Public Health [announced](#) that two Connecticut residents have tested positive for WNV infection. These are the first two cases of WNV-associated illness identified in Connecticut this season.

Mental Health Corner: World Suicide Prevention Day is September 10

According to the [American Foundation for Suicide Prevention](#), over 47,000 Americans died by suicide in 2019 alone. That averages to one death [every 11 minutes](#), and still fails to capture the estimated 1.4 million attempts. The number of people who seriously considered suicide is impossible to approximate, but chances are, you know someone who has attempted or contemplated taking their own life, even if you don't know it.

Especially now, in a time when we feel more isolated than ever, it is our responsibility as members of our communities to have open, honest, and nonjudgmental conversations with the people in our lives.

If you or someone you know is in crisis help is available through the Suicide Prevention Lifeline (1-800-273-8255) and through www.suicidepreventionlifeline.org.

Those who have contemplated suicide know that having someone reach out and show that they see you and that they care can make all the difference. Making that connection, however, can be frightening for both parties, and no one will deny that it is a difficult conversation to have. Learning the skills critical to saving a life is something we can all do to strengthen our communities and weather the storm that the pandemic has wrought.

The Farmington Valley Health District runs **QPR** Suicide Prevention seminars, as well as longer **Mental Health First Aid** courses that cover interventions for suicide as well as other kinds of mental health crises. Both types of courses are free and cover:

- Assessing for risk of suicide or harm;
- Breaking down the bias against people living with mental illnesses, addictions, and suicidal thinking;
- Reaching out to those who suffer in silence, reluctant to seek help.
- Informing individuals struggling with mental illnesses and addictions that support is available;
- Providing community resources;
- Making behavioral health care and treatment accessible to thousands in need.

To enroll, email Justine at JGinsberg@fvhd.org or call at 860-352-2333– you too can save a life!

Additional information about mental health and COVID 19:

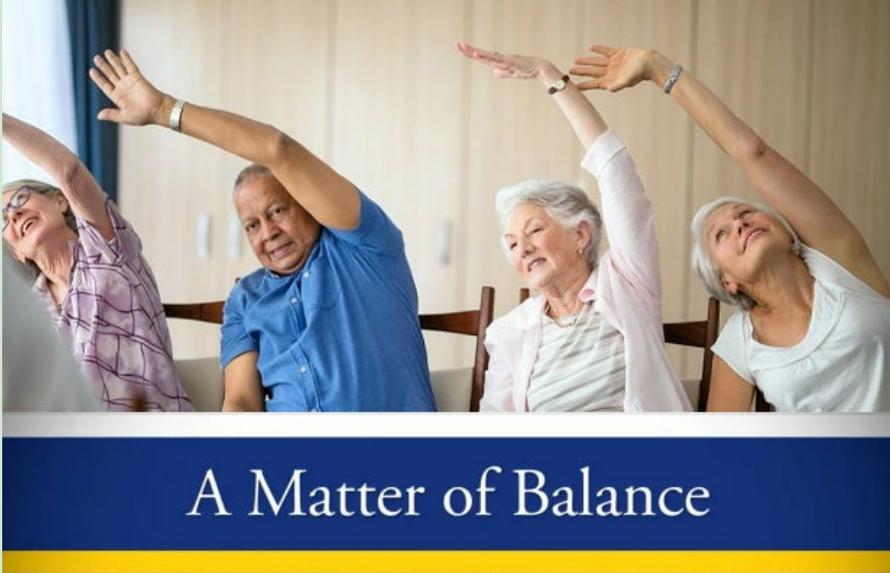
- <https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center>
- <https://mhanational.org/what-can-i-do-when-im-afraid>
- <https://www.jedfoundation.org/covid-19-resource-guide-for-parents-guardians/>

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Did You Know Your Health Department Does...

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...A Matter of Balance Courses?



A Matter of Balance is a course for seniors specifically designed to reduce the fear of falling and improve activity levels among community-dwelling older adults. The program includes eight two-hour classes that include group discussions, mutual problem solving, role-play activities, exercise training, assertiveness training, and a few homework assignments.

The Farmington Valley Health District will be running 2 Matter of Balance programs in **Simsbury** and **Granby** starting this month. If you are interested in enrolling, **contact Justine** at jginsberg@fvhd.org or call our office to speak with her at (860) 352-2333

The health department strives to prevent disease outbreaks and conditions that give rise to poor health, promote health programs and policies that support good health, and protect members of our community from health threats.

