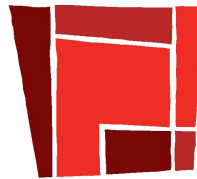


COVID-19 CONSIDERATIONS: CHECKLIST AND GUIDELINES FOR SCHOOLS
Hearing and Vision Screening



ARIZONA DEPARTMENT
OF HEALTH SERVICES

ARIZONA DEPARTMENT OF HEALTH SERVICES (ADHS) SENSORY SCREENING PROGRAM BACKGROUND:

[The Sensory Screening Program](#) supports hearing and vision screening for children in the State of Arizona. Hearing and vision screening statutes legislatively mandate the administration of screenings and referrals to children enrolled in educational programs. The mandates require that a systematic program for hearing and vision screenings be made available to children in order to allow early identification and appropriate intervention. The Hearing and Vision Screening Program in conjunction with stakeholders:

- maintains hearing and vision screening rules and guidelines,
- funds a hearing and vision screening train the trainer program,
- provides annual hearing and vision screening reporting, and
- manages the sensory loaner equipment available for certified trainers/screeners to administer sensory screenings to Arizona’s children.

ADHS SENSORY SCREENING PROGRAM GOALS:

- Identify children who need further evaluation for hearing and vision concerns and refer them to intervention services in the community.
- Provide evidence based training to all Sensory Trainers and Screeners in order to increase the number of quality hearing and vision screenings administered to Arizona’s children.
- Annually increase the number of educational programs providing hearing and vision screenings statewide.
- Develop curriculums for hearing and vision screening and training that will enhance performance and outcomes.



WHAT IS THE PURPOSE OF THIS DOCUMENT?

To inform all ADHS Sensory Screening Program Stakeholders that due to COVID-19, the program has issued considerations for the 2020–2021 school year for conducting hearing and vision screening in schools. Some considerations can be tailored for early childhood settings as applicable. Attachment 1 – considerations for early childhood settings is included with this document.

NOTICE TO ALL STAKEHOLDERS ON THE FOLLOWING:

- ADHS Sensory Screening Program will implement flexibility with hearing screening requirements due to the impacts of COVID-19. The period for these considerations and recommendations is effective beginning *September 1, 2020 until August 3, 2021*. After review of this document, if you are unsure how to proceed with screenings please email SensoryProgram@azdhs.gov and we will work with you to provide additional guidance.
- The considerations outlined are to be applied by schools **that resume any form of in-person or hybrid learning**. Screenings should be carried out for those students attending in person, following school reopening protocols, per the official language of K–12 hearing screening requirements according to [9 A.A.C. 13, Article 1 Hearing Screening](#).
- Additionally, all schools with **distance/virtual learning** in place will not be able to conduct full hearing screening requirements according to 9 A.A.C.13, Article 1 Hearing Screening until students are back on campus. Please refer to *Considerations for Schools in Distance Learning Environment* on **page 11** for ways to engage families.
- As schools transition from distance learning to in-person or hybrid learning, each school can apply the considerations and checklist outlined in this document to plan for hearing and vision screening.
- Due to the varied start dates and instruction type it is important to use the checklist on pages 5-6 to ensure the hearing screening process is consistent with school protocols. The first day of school is based on the first day of in-person instruction as outlined by each school.
- Current waivers on certification and Continuing Education Units (CEUs) are still in effect as outlined in the [July 15 Sensory Update](#).
- Schools should screen special education students according to the [ADE IDEA for Special Education Guidance for COVID-19](#).
- **Vision screening is optional**. Official rules for vision screening have not yet been established under A.R.S. 36-899.10. For anyone currently administering vision screenings, the ADHS Sensory Program encourages you to continue performing screenings following the process outlined by your school or agency; the ADHS Sensory Program requests that vision screenings be administered and/or supervised by an ADHS certified vision screener, if possible.

- The program will revise the hearing screening report form for the 2020-21 school year. The online reporting form link will be updated and shared on the ADHS website by March 1, 2021. The tentative due date is June 30, 2021.
- Visit the [ADHS Sensory Program Home page](#) for ongoing program updates.

COVID-19 CONSIDERATIONS: CHECKLIST AND GUIDELINES FOR SCHOOLS The checklist and guidelines provided are intended to assist hearing/vision stakeholders in making decisions regarding conducting hearing and vision screenings among K–12 students during the COVID-19 pandemic.

- Stakeholders should always adhere to the most recent recommendations from the Centers for Disease Control and Prevention (CDC). Implementation (of CDC guidance) should be guided by what is feasible, practical, acceptable, and tailored to the needs of each community.
- Schools should always consult with school personnel and leadership to ensure screening procedures are consistent with school re-open protocols.
- This is a guidance document and does not provide legal advice. The guidance provided is to be used to aid in planning for the K–12 hearing screening requirements in accordance with [9 A.A.C. 13, Article 1 Hearing Screening](#), and vision screening if schools choose to provide.
- Considerations are based on recommendations from federal and state resources, collaborative partners. This is not an exhaustive list of considerations and implementation may vary based on individual school/LEA re-open plan. This is a fluid document that will change and grow based on local trends and statewide data.



Thank you to all stakeholders for your patience and understanding during this uncertain time. We look forward to continued partnership and feedback as we navigate through these unexpected challenges. This is a fluid document that will change and develop based on local trends and statewide data.

CHECKLIST: HAVE WE CONSIDERED THE FOLLOWING PRIOR TO CONDUCTING SCREENING?

YES	NO, WHAT IS NEEDED?	CONSIDERATIONS
		<p>Consult with school leadership to ensure the hearing screening process is consistent with school and state re-open protocols. Consider a team approach to review and determine the most appropriate actions while adjusting to meet the needs and circumstances of the school, staff, and student.</p> <p>Note: We ask that schools default to the district policies regarding COVID-19 practices that reduce the risk of spreading the virus. If the district policy is at a higher level, adhere to those requirements. Additionally, consider any specific guidance issued by Arizona State or County public health departments that may apply to re-opening plans. See References (pg. 11) at the end of this document.</p>
		<p>How will schools carry out the hearing screening process to accommodate COVID-19 health protocols? (i.e. masks, physical distancing, cleaning, disinfection, and ventilation) What personal protective equipment is needed (“PPE”)?</p> <p>*The use of clear masks in educational settings is emphasized as best practice in order to ensure equal communication accessibility for all children. Additionally, clear masks, rather than face shields, are recommended, as masks still need to be worn under a face shield.</p>
		<p>Who is needed to carry out the hearing screening process for the school? What policies are in place at the school regarding staffing, guests and/or volunteers on campus (i.e. health screening attestations, temperature checks, CDC recommendations for immunizations)? How will the protocols outlined in the <i>General Guidelines</i> section of this document be shared/communicated with staff/visitors/volunteers/external screeners? Will training of volunteers/screeners be needed?</p>

		<p>Implementation of physical distancing through increased spacing, small groups, and limited mixing between groups, if feasible. Have students with varied special needs been considered(e.g.wheelchair accessible, allergies, language barriers etc.)? How will populations such as those students with IEPs that require hearing/vision screens be prioritized?</p> <p>*Refer to Child Find or ADE IDEA for special education guidance for COVID-19</p>
		<p>Equipment Needs. Does the school have equipment to conduct screenings? Does screening equipment need to be reserved through the ADHS Sensory Program Loan Equipment. How will the cleaning and disinfecting of equipment be handled? Additional guidance for cleaning, disinfecting, and equipment reservations is provided below.</p>
		<p>What will our timeline be? How many days will be needed to conduct and complete the screening process? What is the timeline to complete screenings? Plan for additional time disinfecting equipment in between use.</p> <p>*Timelines should consider referrals and follow-up for those children who failed hearing and/or vision screenings.</p>
		<p>OTHER SITE SPECIFIC CONSIDERATIONS: (intended to be blank and filled in by school/site for other considerations that are site specific)</p>

ADHS SENSORY SCREENING PROGRAM RESERVATION/RETURN OF EQUIPMENT:

- Sensory Screening Equipment webpage - [Online Equipment Booking Request](#)
- Equipment will be available to pick up at BWCH Front Desk
 - 3rd Floor, Suite 320, 150 N. 18th Ave., Phoenix, AZ 85007
- Check in at the Main Lobby of Building 150. Please provide / show your online Loan Equipment Booking Confirmation ID / receipt upon arrival.
- Pick up and drop off **from 9:00 am to 3:00 pm** till further notice, Monday through Friday. Closed on State Holidays.
- Equipment must be picked up and dropped off by the person responsible for equipment.
 - **No courier or delivery services will be permitted!**
- Review the proper care procedure and sign on the 2nd page of the booking receipt upon pickup and drop off.
- Verify the correct equipment #'s with the loan equipment confirmation receipt before leaving the building.
- All ADHS visitors **must wear a mask** upon entering the building.

GENERAL GUIDELINES FOR CONDUCTING HEARING AND VISION SCREENING:

Physical Distancing & Masks:

Limiting the physical interactions of students by at least 6 ft. is one way to mitigate exposure to infectious disease. LEAs should consider their ability to physically distance students to the extent possible. It is recommended that LEAs also consider masks as a mitigation strategy for both staff and students. CDC provides guidance about [physical distancing](#) and recommends wearing masks especially in settings where physical distancing cannot be maintained. ([“Use of Masks to Help Slow the Spread of COVID-19”](#))

If feasible, the use of clear masks in educational settings should be emphasized as best practice in order to ensure equal communication accessibility for all children. Additionally, clear masks, rather than face shields, are recommended as masks still need to be worn under a face shield.

Take steps to protect children, staff, and others by following the [CDC How to Protect Yourself & Others](#).

Health protocols to implement during screenings:

- Perform temperature check of child before screening.
 - If a child is displaying symptoms of illness (fever, cough, etc.), notify school administrators and postpone screening for that individual for another day.
- Ask the caregiver (if available) if they or someone they live with has (in the past 14 days) had signs/symptoms of COVID-19, been exposed to COVID-19, or tested positive for COVID-19.
- Clean hands often using soap and water or hand sanitizer with at least 60% alcohol, if soap and water are not available.
- Put distance between children and other people by at least 6 feet.
- Conduct screenings in well-ventilated areas.
- All children 2 years and older, as well as the individuals conducting the screening, should wear masks.
- Clean and disinfect high-touch surfaces areas (like tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks) between each use.
- Clean and disinfect hearing/vision screening equipment and screening instruments before and after each use, and properly dispose of those intended to be used only once.
- Gloves should be worn and changed between cleaning of equipment and before and after handling student hearing aids, glasses, or any other devices/aids.
- Consider any allergies to latex or cleaning solutions.

General Practices & Environmental Infection Control:

Environmental infection control requires cleaning and disinfecting items and surfaces. The Environmental Protection Agency (EPA) released a [list of disinfectants for Use Against SARS-CoV-2 \(COVID-19\)](#).

Cleaning and Disinfection: Cleaning refers to the physical removal of germs, dirt and impurities on the surface, but not necessarily killing germs. To disinfect means to kill germs on surfaces and objects. All visibly soiled items must first be cleaned before disinfecting. . Disinfection protocols should be practiced throughout the entire screening process. All items that come into contact with children, screeners, and volunteers should be thoroughly cleaned and/or properly disposed of to ensure health and safety; including but not limited to, all surfaces, equipment, hearing and vision screening tools such as occluders and ear tips, etc.

Frequently touched surfaces in work areas should be disinfected regularly. Touched surfaces by students, volunteers or staff such as equipment, examination chairs, arm rests, and counters should be disinfected after each use. Hearing aids or other devices used by students should be handled with the use of gloves. If available, wear gloves while cleaning up. Always thoroughly wash hands after contacting a potentially infectious item and surface and in between changing gloves.

Disposables: Many items that have the potential for serving as cross-contaminants may be purchased as disposables, including otoscope specula, immittance and OAE probe tips, earmold impression syringe tips, insert receivers, infection control earphone covers, and probe-microphone tubes. The increased hygiene provided by the use of insert earphone receivers is one more advantage over the continued use of supra-aural earphones. From an infection control standpoint, the use of products or items marked as disposable or one-time-use should be used as directed.

CDC GUIDANCE FOR HOW TO CLEAN AND DISINFECT:

Clean-

- Wear disposable gloves to clean and disinfect.
- Clean surfaces using soap and water, followed by use of disinfectant.
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- Practice routine cleaning of frequently touched surfaces and objects.
 - More frequent cleaning and disinfection may be required based on level of use.
 - Surfaces and objects in use during the screening process such as tables, chairs, headphones, and equipment should be cleaned and disinfected before each use.
 - High touch surfaces include: tables, doorknobs, light switches, countertops, handles, desks, phones, chairs, etc.

Disinfect-

- Recommend use of [EPA-registered household disinfectant](#)
- Follow the instructions on the label to ensure safe and effective use of the product:
 - Many products recommend keeping the surface wet with the product for a period of time (see product label).
- Wear skin protection and consider eye protection for potential splash hazards
- Ensure adequate ventilation

- Use no more than the amount recommended on the label
- Use water at room temperature for dilution (unless stated otherwise on the label)
- Avoid mixing chemical products
- Label diluted cleaning solutions
- Store and use chemicals out of the reach of children and pets

See [EPA's 6 steps for Safe and Effective Disinfectant Use](#)

- Diluted household bleach solutions may also be used if appropriate for the surface.
 - Check the label to see if your bleach is intended for disinfection and has a sodium hypochlorite concentration of 5%–6%. Ensure the product is not past its expiration date. Some bleaches, such as those designed for safe use on colored clothing or for whitening may not be suitable for disinfection.
 - Unexpired household bleach will be effective against coronaviruses when properly diluted. Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser. Leave solution on the surface for at least 1 minute. To make a bleach solution, mix: 5 tablespoons (1/3rd cup) bleach per gallon of room temperature water OR 4 teaspoons bleach per quart of room temperature water.
- Bleach solutions will be effective for disinfection up to 24 hours.
- Alcohol solutions with at least 70% alcohol may also be used.

CONSIDERATIONS FOR SCHOOLS IN DISTANCE LEARNING ENVIRONMENT:

For schools that are in a distance/virtual learning environment for 2020-2021 school year, hearing and vision screening will be interrupted. In order to remain focused on identification of children who need further evaluation for hearing and vision concerns, ADHS Sensory Program encourages schools to explore opportunities to reach out to families about hearing and vision screening resources. Identification, referral, and connection to community resources are essential for children to ensure healthy development and school readiness.

The guidelines provided in this section are intended to assist school nurses and staff identify cost effective strategies to communicate with families the importance of hearing and vision screening and to provide community resources for their child.

It is important to consult with school leadership to ensure that strategies implemented are consistent with school re-opening protocols and to determine the most appropriate actions while adjusting to meet the unique needs and circumstances of the setting. Implementation (of CDC guidance) should be guided by what is feasible, practical, acceptable, and tailored to the needs of each setting.

Example strategies to engage with families while distance learning:

- Reach out to families via call, email, letter etc. to connect about hearing and vision screening. The Arizona Commission for the Deaf and the Hard of Hearing created a [best practices document](#) for online accessibility and providing virtual screening assessments through online platforms such as Zoom.
- Consider options for families with students that require hearing/vision screening as part of the IEP process. Refer to [Child Find for special education guidance for COVID-19](#) or access [ADE IDEA special education considerations Powerpoint](#).
- Establish a way for families to communicate with school nurses while in a distance learning environment.
- Develop resources in the form of flyer, postcards to share a list of hearing/vision resources and providers.
- Mail out of resources to link students and their families to needed personal and preventative health services (hearing, vision, immunizations etc.) to mitigate barriers to attaining optimal health.

OTHER TOOLS AND RESOURCES FOR WORKING WITH CHILDREN AND YOUTH:

- [Communicating with Individuals with Hearing Loss While Wearing a Mask](#)
- [Arizona Commission for the Deaf and the Hard of Hearing](#) - Deaf, DeafBlind, and Hard of Hearing Services, Family and Community Resources, Equipment Distribution Program, and Arizona Relay Services, etc.
- [The National Center for Children’s Vision and Eye Health - Children's Vision Screening Considerations for Schools, Head Start and Early Care and Education Programs During the Covid-19 Pandemic](#)
- [Medical Services Project](#)
- [School Nurse Organization of Arizona](#)
- [Arizona Resource Guide-COVID-19](#) - Supporting Child and Family Well-being During COVID-19

REFERENCES:

- Arizona Department of Education - [Guidance to Schools on COVID-19](#)
- Arizona Department of Education - [Special Education Considerations - IDEA During COVID-19](#)
- Arizona Department of Health Services - [Safely Returning to In-Person Instruction](#)
- Department of Child Safety - [COVID19 Resources and Information](#)
- Department of Child Safety - [Return to School Guidance for DCS Congregate Caregivers](#)
- American Academy of Audiology - [Infection Control](#)
- CDC - [Schools and Child Care Programs](#)
- CDC - [Cleaning and Disinfecting Your Facility](#) and [Infection Control in Spanish](#)

Please visit arizonatogether.org for more resources for navigating COVID-19 for families, individuals, businesses, and more.

ATTACHMENT 1 - CONSIDERATIONS FOR EARLY CHILDHOOD SETTINGS:

The following are considerations for stakeholders conducting hearing/vision screening in early childhood settings. All early childhood providers must review the **GENERAL GUIDELINES FOR CONDUCTING HEARING AND VISION SCREENING** section of this document to implement health and safety protocols to mitigate risk of COVID-19 exposure.

Early childhood screening providers are those that serve children ages five and younger in settings that include but are not limited to: child care providers, family homes, health fairs and clinics.

All early childhood providers must have a protocol that ensures the health and safety of their staff, as well as the children, their family members and other adults at screening sites. Protocols must address factors including but not limited to: masks, physical distancing, cleaning, and disinfection.

- When wearing masks, screening staff should pay close attention to young children's social and emotional cues and responses, and make every attempt to connect with children. Normalizing the experience, to the extent possible, is highly recommended.
- When screening young children, any toys or items used to keep children's attention, must be sanitized between use. Note: Children's books are not considered a high risk for transmission and do not need additional cleaning or disinfection.

As early childhood providers provide screenings in various cities and counties, providers should be aware of any local or county-level ordinances that may impact them. For example, local mask ordinances.

When conducting screenings at **child care and community based sites**, screening organizations should review the *school setting considerations and checklist on pages 4-6* of this document. In addition, screening organizations should consider the following:

- How your organization's protocols for vision and hearing screenings align or differ with the health and safety protocols that the screening site has in place (e.g. child care centers may have a specific pandemic response or health and safety policy/procedure that provides guidance on how outside organizations may safely enter their location and interact with children and adults).
- Additional health and safety measures your organization should implement in order to align with the screening site's requirements.

- Your organization’s minimum requirements for health and safety in order to conduct screenings at a screening site. For example, your organization’s minimum requirement may include a daily temperature check however the screening site does not.
- How your organization’s health and safety protocols will be implemented successfully while conducting hearing and vision screenings.
- Asking if any children or adults at the screening site in the past 14 days have:
 - Had [signs or symptoms of COVID-19](#);
 - Been exposed to another individual diagnosed with COVID-19; and/or
 - Tested positive for COVID-19.
- At the time of screening, maintain small cohort sizes of children if they cannot be brought one by one into the screening room/space.
 - Child care or organizational staff should still be present with children during screenings and persons should be spaced at least 6 feet apart.
- Developing a process to be notified if any children or adults at the screening site (that screeners were exposed to) tested positive for COVID-19 within 14 days from the screening date.

When screening in **family homes**, screening organizations should consider the following:

- Before arriving to conduct vision/hearing screening:
 - Families are aware of the screening process and mitigation measures that will be implemented while conducting screenings.
 - Families are aware of any requirements they must abide by in order for the screening to occur. For example, the screening organization may require all individuals age 2 years and older to wear a face covering.
 - Families are aware that they have the option to decline the screening.
 - Ask the family if any children or adults in the home in the past 14 days have:
 - Had [signs or symptoms of COVID-19](#);
 - Been exposed to another individual diagnosed with COVID-19; and/or
 - Tested positive for COVID-19.