Prince George County Schools COVID-19 Health Service Recovery Plan for K-12

JUNE 2020





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PRINCE GEORGE COUNTY SCHOOL DIVISION COVID-19 SCHOOL HEALTH SERVICES RECOVERY PLAN

I. INTRODUCTION

These are unprecedented times. Students, families, and educational staff have continued to shift and be flexible in the face of novel coronavirus COVID-19. The purpose of this document is to outline strategies for the various educational areas with a detailed emphasis on the health and clinic operations in response to the COVID-19 Pandemic. Our Prince George County School Division reentry plans are designed to minimize disruption to teaching and learning, keep students and staff safe, protect high risk populations, and protect students and staff from social stigma and discrimination. These guidelines have been carefully considered utilizing the latest research from the Center for Disease Control, the Virginia Department of Health, and in conjunction with our local Health Department Officials to address and promote the safety, health, and welfare of our students and staff.

The phased approach to school reopening allows Prince George County Schools to address the health, safety, social, emotional, and physical well-being of students and staff. This also allows for the school district to prioritize the needs of our most vulnerable learners. The final goal of the phased approach is to have all students back in everyday school attendance meeting all their educational goals.

II. IN ALL PHASES

- Daily health screenings of students and staff
- Identify, protect, and support vulnerable students and staff who are at higher risk for severe illness, by providing options for telework and virtual learning.
- Provide remote learning exceptions and teleworking for students and staff who are at a higher risk of severe illness.
- The use of face coverings by staff when 6 feet physical distancing cannot be maintained.
- Encouraging the use of face coverings in students as developmentally appropriate, in settings where physical distancing cannot be maintained.
- Ensure that external community organizations that use any Prince George County Public School facilities also follow this guidance.

During Phase I:

- Instruction will be mostly remote
- Social distancing measures should be implemented on buses and buildings, including but not limited to:
 - A maximum of 10 people per bus or classroom
 - 6-foot separation whenever possible
 - Restrict mixing groups of students
 - Close communal spaces
 - No large gatherings per Executive Order
 - No athletics or extracurricular activities may be offered

During Phase II:

- Instruction will still be predominately remote.
- In person instruction may be offered for special education programs, preschool third grade students, and/or English learners.
- Summer camps in school settings may be offered to students of any age.
- Social distancing measures should be implemented on buses and buildings, including but not limited to:
 - 6-foot separation whenever possible
 - Restrict mixing groups of students
 - o 50-person limit on large gatherings, assemblies, graduation, etc.
 - Close communal spaces if possible, otherwise stagger use and disinfect in between use
 - Limited extracurricular activities and athletics with modification strategies

During Phase III:

- Instruction to shift to a more in-person instruction, for any student. Remote instruction will supplement in person instruction for students.
- Childcare and/or before and after care in schools may be offered.
- In order to accomplish social distancing, there will be staggered schedules for students (learning plan).
- Social distancing measures should be implemented on buses and buildings, including:
 - o 6-foot separation whenever possible
 - Large gathering limit, subject to Executive Order
 - Restricting mixing groups of students to include adjusting schedules, transitions, recess options, and instruction
 - Athletics and extracurricular activities may be expanded with modification measures

III. PHASE I, PHASE II, AND PHASE III DEFINED:

	Phase I	Phase II	Phase III
Permissible In-Person Instruction and building capacity	In addition to childcare programs and schools issued a variance; programs may be offered to special education students with a max class size of 10	All previously permitted options, plus in-person instruction for Preschool through third Grade; instruction for English Learners; and summer camp programs in school buildings are permitted.	In-person instruction can be offered for all students, however strict social distancing measures should be implemented.
Gathering Limits (applies to offices, classrooms, cafeterias, auditoriums, graduation ceremonies, etc.)	Max size of 10 individuals per room or bus.	Gathering limit increased to 50 if other social distancing measures are in place.	Gathering limits TBD.

Social Distancing	Maintain 6-foot separation between desks, tables and workstations; and between students and staff to the greatest	Maintain 6-foot separation to the greatest extent possible.	Maintain 6-foot separation to the greatest extent possible.
Bus Capacity	extent possible. 6-foot distancing with a max capacity of 10 students.	6-foot social distancing measures.	6-foot social distancing measures.
Recess	Groups of 10 or less, socially distanced.	Groups of 50 or less, socially distanced, and with minimal mixing of groups.	Groups of 50 or less, socially distanced and with minimal mixing of groups.
Health Screenings and Temperature Checks	Conduct daily health screenings for symptoms and history of exposure for students and staff.	Conduct daily health screenings for symptoms and history of exposure for students and staff.	Conduct daily health screenings for symptoms and history of exposure for students and staff.
Face Coverings	Cloth face coverings should be worn by staff in times when at least 6 feet physical distancing cannot be maintained. Schools should encourage the use of face coverings for students as developmentally appropriate in settings where physical distancing cannot be maintained.	Cloth face coverings should be worn by staff in times when at least 6 feet physical distancing cannot be maintained. Schools should encourage the use of face coverings for students as developmentally appropriate in settings where physical distancing cannot be maintained.	Cloth face coverings should be worn by staff in times when at least 6 feet physical distancing cannot be maintained. Schools should encourage the use of face coverings for students as developmentally appropriate in settings where physical distancing cannot be maintained.
Athletics, Extracurriculars and Field Trips	Prohibited.	Limited athletics and extracurricular activities with social distancing.	To be determined.

IV. PLANNING TO REOPEN- (PHASE I, PHASE II, PHASE III)

- a. COVID-19 Team: A COVID-19 team has been established within the Prince George County School Division with a point person at each individual school. The School Division Core COVID -19 Team consists of the following:
 - Superintendent Dr. Lisa Pennycuff
 - Assistant Superintendent of Instruction and Accountability, Mr. William Barnes

- Assistant Superintendent for Support Services, Mr. Dustin Menhart
- Director of Secondary Education, Mrs. Stephanie Bishop
- Director of Elementary Education, Mrs. Robin Germanos
- Director of Student Services, Mrs. Zetta Ethington
- Director of Human Resources, Mrs. Laura Estes
- Director of Operations, Mr. Ron Rhodes
- Director of Transportation, Mr. Dustin Nase
- Coordinator of Nutritional Services, Mrs. Lana Pearce
- Health Services Coordinator, Ms. Michelle Grate
- Coordinator of Custodial Services, Mr. Lin Turner
- VDH: Crater Health District, Katrina Saphrey, Senior Epidemiologist

b. Local Health Department Procedures:

The Prince George Department of Health/Crater Health District at (804) 863-1652 are the contact health professionals for which guidance will be available for our school division. The Health Department will be contacted for the following:

- For continual guidance of COVID-19
- If there is a potential COVID -19 exposure
- If there is a diagnosis in our school division of COVID-19
- If there is any student or staff in quarantine due to exposure
- Reviewing of Health Plans and guestions about COVID-19
- Providing tracking of illness numbers and guidance
- School Division closure recommendations and information.
- Contact tracing guidance
- Any questions related to COVID-19 that should arise
- **c. Health and Absenteeism Monitoring Plan**: The absenteeism and monitoring plans for Prince George County School's students and staff will consist of the following measures:
 - Reporting all absenteeism numbers of students and staff daily by each school secretary by 10:00 AM.
 - Reporting of student and staff absences will be documented in the Prince George County School Divisions Tyler SIS program
 - Staff and student absences will be monitored daily by active surveillance to determine if absences are due to COVID-19
 - Health Services Coordinator will be notified of any student or staff absences for COVID-19
 - Any reports of staff or student absences related to COVID-19 will be immediately reported to Prince George/Crater Health Department for guidance
- **d. Communications All-inclusive Plan**: The following strategies will be utilized by Prince George County School Division to keep staff, students, parents, and the community informed:
 - Health Department Prince George County School Division will continue to collaborate, share information, and review plans with the Prince George County

Department of Health/Crater Health District to protect the health and safety of all members of the school.

- Registered Nurses Prince George County School District has a Registered Nurse in every school building clinic and as such:
 - 1. Will be communicating with parents about students' health and wellness needs.
 - 2. School Nurses will also be training staff about COVID-19 health and safety measures outlined in this plan.
 - 3. Our school nurses will communicate with parents about student health needs or concerns.
 - Our nurses will continue to communicate with the Prince George Health
 Department to ensure continuity of health care measures for students and
 staff.
 - 5. School Nurses will communicate with parents about individualized Nursing Care Plans and about our students with chronic health conditions or students who are vulnerable to illness.
- Absenteeism Concerns of absenteeism, identified cases of COVID-19, or those
 in quarantine due to exposure will be directly communicated to the Prince George
 Heath Officials to identify a course of action, if needed.
- **Contact Tracing** Prince George County School Nurses will assist the local Health Department in contact tracing when needed.
- Re-Opening Strategies Clear communication will be issued to parents about reopening strategies for the school district:
 - 1. Letter to Parents and Staff
 - 2. Reopening Strategies posted on the Prince George County Website
 - 3. School Messenger
- Stay at Home; Return to School Guidelines Clear communications from Prince George County School Division will be given to parents and staff regarding stay at home/return to school guidelines outlined in this plan, as well as the strategies in place for maintaining a health school environment to keep their children safe, parameters for returning to school and healthy strategies implemented by the school district:
 - 1. Communications sent home to parents
 - 2. Provided on the Prince George County Website
 - 3. Illness Information Letter sent home every year to parents
- Sick Day Guidelines Frequent messaging will be provided for reminders about keeping children home when they are sick and health strategies to deal with

stress which will provide clear expectations to parents and help with confidence for a safe return to school for their children.

- School messenger
- 2. Website
- 3. Flier for Parents
- Procedures and Guidelines for School Personnel When to stay home and when staff can return to work after an illness or COVID-19 exposure:
 - 1. Communications Memo
 - 2. Letter to staff
 - 3. Reminder signs throughout the school building
 - 4. Nurses will teach staff before reopening
- **New Policies** will be communicated to parents, and staff by:
 - 1. Communications Memo
 - 2. Information provided on school website
 - 3. School Messenger, when needed
- Outbreak of COVID-19 Plans to communicate an outbreak or positive cases detected at the school will be provided by:

School Messenger email and phone call to parents and staff

- Community Response Efforts Prince George County School division will actively participate in community response efforts by meeting with local officials and collaborating with our local Prince George/Crater Health Departments.
- Training will be provided for school staff and students (see Training Plan below).
- e. Training of Staff Prince George County staff will receive information and training before reopening during Back to School Orientation in order to promote proactive health strategies to keep students safe while attending school (see extensive training information under the "Key Elements Promoting Behaviors that Reduce the Spread of COVID-19" section in this plan), and will be provided by Prince George County School Registered Nurses and include the following:
 - Proper handwashing technique
 - Illness prevention strategies
 - Proper use of face coverings
 - Social distancing in the school building and classrooms
 - How to recognize signs and symptoms of COVID-19
 - What to do if a student appears or says they are ill
 - When to stay home if you are feeling sick

- When to return after an illness or COVID-19
- Revised processes and procedures for clinic-based visits
- First-aid refresher (all teachers have had first-aid training by American Health and Safety Institute – Nationally Accredited)
- Bloodborne Pathogens Training
- f. Training for Students: Students of Prince George County Schools will be given information and educated by various methods such as videos, health webinars, demonstration, and by signs for reminders which are posted throughout the school building. Training will be provided for the following:
 - What is social distancing and how this is done in school demonstration
 - What should they do if they feel sick verbal instruction
 - Proper handwashing https://www.cdc.gov/handwashing/videos.html
 - How to prevent the spread of illness during school handouts, CDC video
 - When to wear face coverings during school instruction
 - When to send students to the school nurse
- g. Student Health Services: The area of Student Health Services will be providing direct health services to students (see expanded Health Plan below) while maintaining the following:
 - Nurses will be provided medical-grade PPE for providing care to students and staff
 - The Health Services to students will be specific to both COVID-19 and non-COVID -19 for students and staff (School Clinic Plan below)
 - The provision of Mental Health Supports will be available to students and staff (see Appendix I).

V. PROMOTING BEHAVIORS WHICH REDUCE THE SPREAD OF FLU AND COVID-19; PHASE I, PHASE II, AND PHASE III

- a. Prince George County Schools will provide strategies which will reduce the spread of Influenza and COVID-19. The School District will post preventative measures signs in high-traffic areas that will educate students and staff and serve as reminders of ways to prevent the spread of COVID-19 provided on the CDC website (see Appendix). These measures and reminders will include:
 - Encouraging students and staff to cover their mouth and nose with a tissue when they
 cough or sneeze, place the used tissue in the opened-top wastebasket, and then
 wash their hands.
 - If tissues are unavailable, encouraging students and staff to cough or sneeze into the upper sleeve or elbow, not onto their hands. Then they should wash their hands.

- Wash hands often with soap and water for 20 seconds. If soap and water are not available, use an alcohol-based hand rub with at least 60% ethanol or 70% isopropanol alcohol content and rub until the contents are dry. https://www.cdc.gov/coronavirus/2019-ncov/hcp/hand-hygiene.html
- Encouraging students and staff to avoid touching their face with their hands as much as possible.
- Encouraging students and staff to avoid contact with people who are sick.
- Communicating to staff, students not to come to work or school if they are sick
- Communicating to all staff, students, to social distance 6 feet apart whenever possible:
- Place seats/desks at least six feet apart:
- Students and staff to wear face masks when moving throughout the school building, in the halls, in the restroom, traveling into school and leaving school. Masks can be removed when students are in their classroom desks (6 feet apart). Exceptions will be made if a student has a medical condition in which he/she cannot wear a mask
- Hand sanitizer will be throughout the school building and classrooms, especially at locations of entering and leaving the building.
- Turn desks to face in the same direction (rather than facing each other) or have students sit on only one side of tables, spaced 6 feet apart.
- Students using the restrooms should be wearing face coverings and every other stall utilized. Handwashing should be done after using the restroom. Handles should not be touched after washing hands unless a paper towel is used as a barrier.
- Avoid sharing electronic devices, toys, books, and other games or learning aids.
- Keeping student belongings separated from others' and in individually labeled containers, cubbies, or areas
- Having adequate supplies to minimize sharing of high-touch materials as much as
 possible (E.G., art supplies), and assigning supplies to a single student. If supplies or
 equipment are to be shared, cleaning disinfecting will occur between use.
- Closing of communal use spaces such as cafeteria and playground if possible; otherwise stagger use and disinfect in between use.
- Physical and social distance markers will be placed in designated areas to remind students to stay apart.
- Students will be reminded to not share drinks, food, or utensils with other students
- Staggering arrival and drop-off times for students to limit close contact with parents or caregivers as much as possible.
- Student and staff groupings will be as static as possible by having the same group of children stay with the same staff (all day for young children, and as much as possible for older children).
- Restricting mixing between groups.

- Field trips cancelled, also inter-group events and extracurricular activities will be cancelled during Phase II. These will be revisited during Phase III and beyond.
- Restricting of nonessential visitors, volunteer and activities involving other groups.
- The limiting of size gatherings will be consistent with Executive Orders.
- Adequate supplies will be provided to minimize sharing as much as possible such as dedicated student supplies, computers, and lab equipment.
- Food Service/Cafeteria: Students will be served individually prepared meals in classrooms to minimize the use of the communal space in the cafeteria. If cafeteria is used, social distancing should take place throughout the cafeteria and lunch line. Prior to eating, students will have time to wash their hands.
- Transportation Social distancing between children on school buses—for example, seating children one child per seat, every other row. If a variance is requested of the VDOE, physical distancing will follow the details outlined in the variance. Seats will be disinfected between student seat usage.
- School Related and Recreational Sports Prince George County Schools will follow the Phase Guidance for Schools and CDC Guidance for all sports activities
- Prince George County School will continue to follow the Governor, CDC, and local Health Department measures in response to each phase. If a variance is requested of the VDOE, the details outlined in the variance will be followed.

VI. MAINTAINING HEALTHY ENVIRONMENTS

a. HEALTHY HYGIENE PRACTICES – Phase I, Phase II, and Phase III

Prince George County Public Schools will promote healthy hygiene practices, including handwashing or the use of alcohol-based hand sanitizers, to prevent infections and reduce the number of viable pathogens that contaminate the hands. Handwashing is the single most effective infection control intervention (CDC). Handwashing mechanically removes pathogens, while laboratory data demonstrates that 60% ethanol and 70% isopropyl alcohol, the active ingredients in CDC-recommended alcohol-based hand sanitizers, inactivates viruses that are genetically related to, and with similar physical properties as COVID-19. Hand hygiene is performed by washing hands with soap and water for at least 20 seconds or using hand rub with 60-95% alcohol content until the content dries. If hands are visibly soiled, the use of soap and water is recommended. (https://www.cdc.gov/coronavirus/2019-ncov/hcp/hand-hygiene.html)

Hand sanitizing dispensers will be located throughout the campus where sinks and other hand-washing facilities are not readily available. Students/ staff will be encouraged to wash hands or /use hand sanitizer often and especially:

- After blowing your nose, coughing, or sneezing.
- After using the restroom.
- Before eating or preparing food.
- Before and after touching your face.
- After touching frequently touched areas (e.g., doorknobs, handrails, shared computers).

Individuals providing health care services should perform hand hygiene before and after contact with each student, contact with potentially infectious material, and before putting on and after removing PPE, including gloves. Hand hygiene after removing PPE is particularly important to remove any pathogens that might have been transferred to bare hands during the removal process.

b. Hand Washing

- Soap dispensers in all bathrooms must be in working order and filled with soap
- Teachers should allow time for students to wash their hands after toileting and before eating
- Wash hands front and back with soap for 20-30 seconds, rinse well, dry with paper towel
- Turn off spicket with paper towel and discard in trash can
- Hand sanitizer is not to be utilized as a substitute for handwashing after using the restroom
- Please notify a custodian immediately if a soap dispenser is out of soap or not working properly

c. Printed Materials for Students and Staff to Maintain a Healthy Environment (see Appendix):

Print Material for COVID-19 (CDC)

https://www.cdc.gov/coronavirus/2019-ncov/communication/factsheets.html

Avoid Spreading Germs at Work (CDC)

https://www.cdc.gov/nonpharmaceutical-interventions/pdf/dont-spread-germs-work-item3.pdf

Cover your Cough Posters (CDC)

https://www.cdc.gov/flu/pdf/protect/cdc_cough.pdf_COVID-19

COVID-19 Health Information Poster

coronavirus-health_information_flyer phs_logo_2-28-20_final.pdf

Stay Home if you are sick Posters (CDC)

https://www.cdc.gov/flu/pdf/freeresources/updated/stay-home-from-work-poster.pdf

Wash your Hands Posters (CDC)

https://www.cdc.gov/handwashing/posters

Physical Distancing

https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html

d. Health Safety: Having adequate supplies and reminders around campuses will help to keep students well:

 Having adequate supplies to support healthy hygiene behaviors, including soap and hand sanitizer with at least 60% alcohol, paper towels, tissues, and no-touch trash cans, disinfecting wipes or cleaning solution.

- Posting signs on how to stop the spread of COVID-19, properly wash hands, promote
 everyday protective measures, and properly wear a face covering throughout
 locations in each school building.
- Utilizing cafeteria and gymnasium for more classroom space, if needed.
- Physical Education classes outside utilizing strategies for social distancing 6 feet apart such as outdoor activities set up in stations which do not require touching or sharing of object (ex. obstacle courses).
- Art projects to be completed by each student having their own supplies which they keep in a closed container. Sharing of supplies should not take place.
- For music, students will have their own equipment/instruments and remain 6 feet apart. Choirs should be 6 feet apart and consider wearing masks during practice.
- Resource teachers at the elementary level will travel to the students' classes to the greatest extent possible to limit the students need to travel.
- Ensuring ventilation systems operate properly and increase circulation of outdoor air as much as possible such as by opening windows and doors.
- Ensuring that all water systems and features are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other diseases associated with water.

VII. ENVIRONMENTAL (SAFETY PROCEDURES: CENTER FOR DISEASE CONTROL & ENVIRONMENTAL PROTECTION AGENCY)

- a. Normal routine cleaning will be done with soap and water which will decrease how much of the virus is on surfaces and objects, which reduces the risk of exposure.
- b. Examples of frequently touched surfaces and objects that will be disinfected and periodically cleaned throughout the school day include:
 - Tables
 - Doorknobs
 - Light switches
 - Countertops
 - Handles
 - Desks
 - Chairs
 - Phones
 - Keyboards
 - Toilets
 - Faucets
 - Sinks
 - Touch screens
- c. Prince George County School Division uses only EPA-approved disinfectants against COVID-19 to help reduce risks, when available. Frequent disinfection of surfaces and objects touched by multiple people is important.

- d. When EPA-approved disinfectants are not available, alternative disinfectants can be used (for example: 1/3 cup of bleach added to 1 gallon of water, or 70% alcohol solutions). Keep all disinfectants out of the reach of children.
- e. Disinfectants kill germs on surfaces. By killing germs on a surface after cleaning, we can further lower the risk of spreading infection.
- f. Storage and use of disinfectants will be done in a responsible and appropriate manner according to the label.

g. Cleaning and Disinfecting Precautions:

- Do not mix bleach or other cleaning and disinfectant products together. Keep all disinfectants out of the reach of children.
- Do not overuse or stockpile disinfectants or other supplies. This can result in shortages of appropriate products for others to use in critical situations.
- Always wear gloves appropriate for the chemicals being used when you are cleaning and disinfecting. Additional personal protective equipment (PPE) may be needed based on setting and product. For more information, see CDC's website on Cleaning and Disinfection for Community Facilities.
- Practice social distancing, wear facial coverings, and follow proper prevention hygiene, such as washing your hands frequently and using alcohol-based (at least 60% alcohol) hand sanitizer when soap and water are not available.
- If you oversee staff in a workplace, considerations about the safety of custodial staff and other people who are carrying out the cleaning or disinfecting should be made. These people are at increased risk of being exposed to the virus and to any toxic effects of the cleaning chemicals. These staff should wear appropriate PPE for cleaning and disinfecting.
- To protect our staff and to ensure that the products are used effectively, staff should be instructed on how to apply the disinfectants according to the label.
- h. **Health Screening and Monitoring During COVID-19 -** Screening, monitoring, and testing are essential components of limiting the spread of COVID-19. An important part of keeping Prince George County Schools safe is actively encouraging sick staff and students to stay home if they are ill and emphasizing to all the importance of knowing the symptoms of COVID-19.

Daily health screenings of students and staff for COVID-19 symptoms are a recommendation of the CDC. Therefore, Prince George County Schools will assess student temperatures and symptoms (or absence of symptoms) daily during Phase II. This process will be re-assessed for Phase III.

Symptoms of COVID-19 - People with these symptoms or combinations of these symptoms may have COVID-19:

- Cough
- Shortness of breath or difficulty breathing
- Fever (CDC defines this as 100.4F or greater, or when one feels warm to the touch, or gives a history of feeling feverish)
- Chills
- Muscle pain
- Sore throat
- Loss of taste or smell

This list is not all possible symptoms. Other less common symptoms have been reported, including gastrointestinal symptoms like nausea, vomiting, or diarrhea.

COVID-19 Screening Questions

Students and staff should assess themselves for symptoms of COVID-19 before reporting to school; and/or may be asked the following by school personnel upon arrival:

"YES or NO since my last day in the building, have I had any of the following:"

- A fever (100.4°F or higher) or not feeling well?
- A cough that cannot be attributed to another health condition?
- Shortness of breath that cannot be attributed to another health condition?
- Chills that cannot be attributed to another health condition?
- Sore throat that cannot be attributed to another health condition?
- Muscle aches (myalgia) that cannot be attributed to another health condition or specific activity (such as physical exercise)?
- Household or close contact with an individual who tested positive for the virus as a screen question?

If an individual answers YES to any of the screening questions before arriving, they should stay home and not enter the building. If an individual reports upon arrival, the school should activate our Protocol for COVID-19.

Prince George County School Clinics - Every school building has a school health clinic and every School has a Registered Nurse. School nurses promote health, wellness, attend to students' illness needs, and assist in the area of disease prevention so students may be safe and learn in the educational setting.

School Clinics - The Health Clinic Space will be arranged in order to distance students coming to the clinic for routine visits from those who are sick and limiting the number of students in the clinic at one time (Department of Education/Recover, Redesign, Restart (RRR) p. 25)

 Create separate rooms in each school building so any student or staff member who exhibits COVID 19 symptoms can be separated from other students and staff. This separate room will need to be monitored by a designated staff member (Department of Education/Recover, Redesign, Restart p. 25)

^{**}First aid kits should be made available to teachers for minor scrapes and abrasion so that clinic exposure can be limited to urgent needs (RRR).

When Students Should to Visit Health Office:

- Student may independently walk to clinic for variety of individualized needs, if none
 of the following symptoms are present:
 - Confusion/ "doesn't seem to be himself'/disorientation
 - Decreased level of consciousness
 - Shortness of Breath/Respiratory Distress
 - o Dizziness/Lightheadedness
 - Spinal Cord Injury/Head Injury complaining of neck pain Do not move position
 - Vision impairment
 - Diabetic "Lows"
 - Hemodynamic compromise
 - Individualized triage judgement call of faculty/staff or based off reported condition as directed by school nurse
 - Students need to stay in place for in-person evaluation and/or retrieval by wheelchair or must be accompanied by a staff member if any of above-mentioned criteria are met, or per faculty/staff best judgement.
 - 2) To prevent potential exposure to infectious diseases, promote isolation, and decrease office congestion. Please note that students do **NOT** need to be sent to Health Office with the following common situations:
 - a. Paper cuts, small abrasions, picked scabs have them wash hands and apply band aid, if needed.
 - b. Minor headaches and/or fatigue allow them to get snack/drink water first. Better after 20 minutes?
 - c. Mild stomachache and/or nausea allow to use the restroom, drink water, and have snack first. Better after 20 minutes?
 - d. Localized bug bite if no allergy history and not spread over large area of skin, apply cool paper towel to area to help prevent scratching.
 - e. Anxiety/Stress/Psychosocial Issues if not affecting breathing or medical health try snack, redirection, or please refer to Counseling/Guidance or other applicable services for collaboration.

Recommendations for Communicable Disease

1) Students and Staff:

- Avoid close contact with people who are sick.
- Stay home when you are sick.
- Cover your cough or sneeze into your elbow or a tissue, then throw the tissue in the trash. Follow with hand hygiene.
- Avoid touching your eyes, nose, and mouth. If you do, wash your hands afterwards.
- Wash hands often with soap and water (20 seconds).
- If you do not have soap, use hand sanitizer (60-95% alcohol based).

Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.

- Ensure all vaccines are up to date of students, self, and household members
- o Promote non-contact methods of greeting
- Wear face coverings
- Social Distance six feet apart

Sick Day Guidelines- The Prince George County Schools Sick Day Guidelines have been established and are in place currently in our school division. Illness guidelines are specifically outlined here:

Illness Symptoms Requiring Absence:

- Active vomiting or diarrhea
- Fever/chills/generalized body aches
- Fever constitutes 100.4 degrees Fahrenheit or higher. However, evaluate the clinical picture.
- A temperature of 100.4 with body aches likely indicates acute illness.
- Respiratory symptoms

If presenting with COVID-19 symptoms, they must follow up with a medical provider with a clearance note from the Physician prior to returning to school.

- Have parent/guardian call their Primary Care Physician for guidance regarding presenting symptoms if testing for COVID-19 is warranted.
- Parents/Guardians may also call the Crater District Health Department (804) 863-1652.
- Virginia Department of Health COVID Hotline for questions (877) ASK-VDH3.
- Infectious disease if stable and clinically appropriate referral at time of assessment.
 - The first 24 hours of various antibiotic treatments (i.e. strep throat, pink eye, etc.)
 - Undiagnosed, new, and/or untreated rash or skin condition (i.e. generalized hives, wound with purulent drainage, etc.)
 - Doctor's note requiring an individualized plan to stay home.

When to Return:

First month after school re-opens non-COVID 19 Diagnosis:

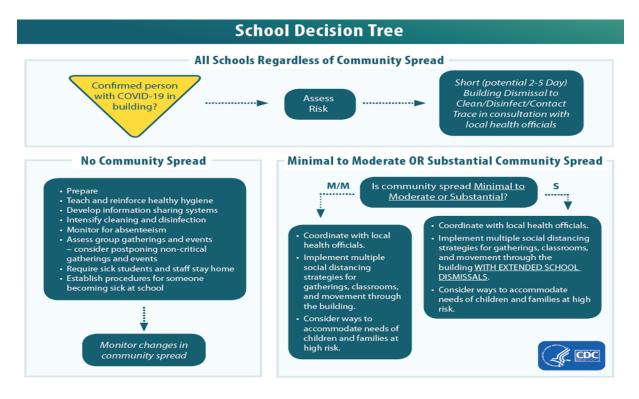
- Active vomiting or diarrhea 72 hours since last episode
- Fever 72 hours fever-free without the use of feverreducing medication
- After 24 hours on antibiotics for variety of bacterial causes
- Doctor's note of clearance for various student-specific medical conditions

VIII. PREPARING FOR WHEN SOMEONE GETS SICK

If Coronavirus Suspected:

- Separate any student or staff who presents with COVID-19 symptoms.
- Have student transported by parent to a health care facility
- Administrators should close off areas used by a sick person and then wait 24 hours to disinfect
- Implement the cleansing and disinfecting procedures outlined in this plan.

COVID-19 Return to School Guidance (See Decision Tree):



- School Nurse or Health Services Coordinator will contact Crater Health District Epidemiologist for guidance and recommendations for school closure upon a confirmed diagnosis of COVID-19.
- Nurses will assist the Health Department in contact tracing when needed.
- Students or staff who have been in contact with a sick person should be informed and asked to stay home and self-monitor for symptoms. Seek Prince George Department of Health/Crater Health District Epidemiology for guidance.
- If there is a confirmed case of Corona Virus in school, administrators should dismiss students and most staff for 2-5- days (Seek Crater Health District Epidemiology Guidance and Recommendations)
- This initial short-term dismissal allows time for the local health officials to gain a better understanding of the COVID-19 situation impacting the school. *The CDC states*, "This allows

- the local health officials to help the school determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread."
- A doctor's note is needed for return if diagnosed with COVID-19 or told to home isolate due to an exposure.
- Longer term Dismissals (information below).

IX. MAINTAIN HEALTHY OPERATIONS (PHASES I, II, III)

- Implement flexible sick leave policies and practices (See Appendix J).
- Prince George Health Services Coordinator will monitor absenteeism to identify any trends in employee or child absences due to illness, as this might indicate spread of COVID-19 or other illness.
- o Staffing for outages will be done by each school building using ESS.
- School back-up staff will have training to ensure continuity of operations.
- School Nurse Coordinator is the designated person to be responsible for responding to COVID-19 concerns. This will be communicated to employees and staff.
- Self-reporting for staff and families of COVID-19 symptoms should be done through each school nurse.
- Notification of exposures and closures will be done by School Messenger email and voice mail.

Closing - Phases I, II, III

- Coordinate with Local health Officials: Prince George County Public Schools will collaborate and work in conjunction with the Prince George County Department of Health/Crater Health District for any notifications about daily spread of COVID-19 in the Prince George area and adjust operations accordingly.
- Where a community is deemed a significant mitigation community, childcare programs should close, except for those caring for the children of essential workers, such as the children of health care workers.
- Dismiss students and most staff for 2-5 days. This initial short-term dismissal allows time for the local health officials to gain a better understanding of the COVID-19 situation impacting the school. This allows the local health officials to help the school determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19.
 - Local health officials' recommendations for the scope (e.g., a single school, multiple schools, the full district) and duration of school dismissals will be made on a case-by-case basis using the most up-to-date information about COVID-19 and the specific cases in the community.
 - During school dismissals, extracurricular group activities, school-based afterschool programs, and large events (e.g., assemblies, spirit nights, field trips, and sporting events) will be cancelled.

Communicate with staff, parents, and students. Prince George County Schools will coordinate with local health officials to communicate dismissal decisions and the possible COVID-19 exposure. This communication to the school community will align with the communication plan in this document.

- Prince George County Public Schools will maintain confidentiality of the student or staff member as required by the Americans with Disabilities Act and the Family Education Rights and Privacy Act.
- Clean and disinfect thoroughly as described in cleaning and disinfecting plan. Close off areas used by the individuals with COVID-19 and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection.
- Cleaning staff will clean and disinfect all areas (e.g., offices, bathrooms, and common areas)
 used by the ill person(s), focusing especially on frequently touched surfaces.
- If surfaces are not clean, they will be cleaned using a detergent or soap and water prior to disinfection.

Make decisions about extending the school dismissal. Temporarily dismissing childcare programs and K-12 schools is a strategy to stop or slow the further spread of COVID-19 in communities.

During school dismissals (after cleaning and disinfection), childcare programs and schools may stay open for staff members (unless ill) while students stay home. Keeping facilities open: a) allows teachers to develop and deliver lessons and materials remotely, thus maintaining continuity of teaching and learning; and b) allows other staff members to continue to provide services and help with additional response efforts. Decisions on which, if any, staff should be allowed in the school should be made in collaboration with local health officials.

Childcare and school administrators will work in close collaboration and coordination with our Prince George Health Department Officials to make dismissal and large event cancellation decisions. Schools are not expected to make decisions about dismissal or cancelling events on their own. School dismissals and event cancellations may be extended if advised by local health officials. The nature of these actions (e.g., geographic scope, duration) may change as the local outbreak situation evolves (CDC).

O Prince George County Public Schools will seek guidance from local health officials to determine when students and staff should return to schools and what additional steps are needed for the school community. In addition, students and staff who are well but are taking care of or share a home with someone with a case of COVID-19 should follow instructions from local health officials to determine when to return to school.

Implement strategies to continue education and related supports for students.

- Ensure continuity of education.
 - Review continuity plans, including plans for the continuity of teaching and learning.
 Implement e-learning plans, including digital and distance learning options as feasible and appropriate.
 - Determine, in consultation with school district officials or other relevant state or local partners:

- o If a waiver is needed for state requirements of a minimum number of in-person instructional hours or school days (seat time) as a condition for funding.
- How to convert face-to-face lessons into online lessons and how to train teachers to do so.
- How to triage technical issues if faced with limited IT support and staff.
- How to encourage appropriate adult supervision while children are using distance learning approaches.
- How to deal with the potential lack of students' access to computers and the Internet at home.

Ensure continuity of meal programs.

- Consider ways to distribute food to students.
- If there is community spread of COVID-19, design strategies to avoid distribution in settings where people might gather in a group or crowd. Consider options such as "graband-go" bagged lunches or meal delivery.
- Consider alternatives for providing essential medical and social services for students.
 - Continue providing necessary services for children with special healthcare needs or work with the state *Title V Children and Youth with Special Health Care Needs (CYSHCN) Program.*

X. PROTECTING VULNERABLE OR HIGH-RISK STUDENTS AND STAFF MEMBERS

Staff Members:

- Staff over the age of 60 and any staff member with an underlying health condition seek the advice of their medical provider and accommodations should be made for such staff member to work remotely from home if the physician deems this to be necessary.
- There will be staff that are at higher risk for severe illness from COVID-19. These vulnerable
 workers include individuals over age 65 and those with underlying medical conditions. Such
 underlying conditions include, but are not limited to:
 - Chronic lung disease, moderate to severe asthma, cancer, hypertension, severe heart conditions, weakened immunity, autoimmune diseases, severe obesity, diabetes, liver disease, and chronic kidney disease that requires dialysis.

The guidance offered below applies to staff. Specific areas may require more stringent safety precautions.

- Consider offering vulnerable workers' duties that minimize their contact with students and other employees if possible.
- Provide employees from higher transmission areas telework and other options as feasible to prevent risk of COVID-19 transmission.

Vulnerable High-Risk Students:

- There will be students that are at higher risk for severe illness from COVID-19. These vulnerable students include those with underlying medical conditions. Such underlying conditions include, but are not limited to:
 - Chronic lung disease, moderate to severe asthma, cancer, hypertension, severe heart conditions, weakened immunity, autoimmune diseases, severe obesity, diabetes, liver disease, and chronic kidney disease that requires dialysis.
- Parents/Guardians of students with underlying medical conditions should seek the advice of their medical provider before sending their child back to school:
 - Offer vulnerable student appropriate accommodations while at school
 - Extend spacing
 - Learning in smaller groups
 - Offer virtual learning opportunities

XI. APPENDICES

Appendix A: HEALTH SCREENING GUIDANCE

Prince George County Public Schools

Health Screening and Monitoring During COVID-19

Screening, monitoring and testing are essential components of limiting the spread of COVID-19. An important part of keeping schools safe is actively encouraging sick staff and students to stay home if they are ill and emphasizing to all the importance of knowing the <u>symptoms of COVID-19</u>.

Daily health screens of students and staff for COVID-19 symptoms are a recommendation of the CDC. Therefore, divisions may decide to assess student temperatures and symptoms (or absence of symptoms) each day. The Daily Employee Screening Form from VDH can be used or adapted by a division to collect and store this information, if necessary.

Symptoms of COVID-19

People with these symptoms or combinations of these symptoms may have COVID-19:

- Cough
- Shortness of breath or difficulty breathing
- Fever (CDC defines this as 100.4F or greater, or when one feels warm to the touch, or gives a history of feeling feverish)
- Chills
- Muscle pain
- Sore throat
- Loss of taste or smell

This list is not all possible symptoms. Other less common symptoms have been reported, including gastrointestinal symptoms like nausea, vomiting, or diarrhea.

COVID-19 Screening Questions

Students and staff should assess themselves for symptoms of COVID-19 before reporting to school and/or may be asked the following by school personnel upon arrival:

"YES or NO since my last day in the building, have I had any of the following:"

- A fever (100.4°F or higher) or a sense of having a fever?
- A cough that cannot be attributed to another health condition?
- Shortness of breath that cannot be attributed to another health condition?
- Chills that cannot be attributed to another health condition?
- A sore throat that cannot be attributed to another health condition?
- Muscle aches (myalgia) that cannot be attributed to another health condition or specific activity (such as physical exercise)?

If an individual answer YES to any of the screening questions before arriving, they should stay home and not enter the building. If an individual reports COVID-19 symptoms upon arrival, the school should activate the emergency protocol for COVID-19.

Appendix B: Employee Symptom Checker, Sample Form

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Month	:
Site Location:	i
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Employee Name	-
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Instructions: Employees must undergo a symptom check prior to entering the workspace. Please check your symptoms at home, select Y=Yes or N=No and record. If you answer yes to any of the below questions, you must stay home. For weekends draw a line through the date. If you have questions, please contact human resources.

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Date	Initials	Exposure to COVID-19 in the past 10 days?	Are you feeling ill?	Record temperature. If >100.4 stay home	Cough Short of breath Difficulty breathing Chills Fatigue Muscle ache Congestion/runny nose Sore throat Headache New loss of taste or smell Nausea Vomiting

Appendix C: STUDENT SYMPTOM CHECKER

Student Name:	Date:	Date: Site Location:		
Event:	Site Location:			
participating in an event. Please ch N=No and record on the sheet. If yo	go a symptom check prior to coming to scheeck your symptoms at home. Please select ou answer YES to any of the below question xposure or at least 10 days have passed single.	Y=Yes ns, you	must stay	
Please record your temperature has 1 lf your temperature is more than 1		No	Yes	
Have you been exposed to some	one with COVID-19 in the past 14 days?			
Do you feel ill?				
Do you have:				
 Cough Shortness of breath or diffi Chills Fatigue Muscle or body aches Congestion or runny nose Sore throat Headache New loss of taste or smell Nausea Vomiting (unidentified cause) Diarrhea 	iculty breathing se, unrelated to anxiety or eating)			
answers above are accurate to the student has not been exposed to ar	the parent of the above-named studen best of my knowledge. I confirm that the ab nyone with COVID-19 in the past 14 days.			
Date: Current Phone N	Number:			

Student Symptom Checker, Sample Form

Month:	
Site Location:	
Employee Name:	

Instructions: Students must undergo a symptom check prior to coming to school. Please check your symptoms at home, select Y=Yes and N=No and record. If you answer YES to any of the below questions, you must stay home. For weekends draw a line through the date. If you have questions, please contact your school nurse or administration.

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	-		> z	> z		> Z
	Date	Initials	Exposure to COVID-19 in the past 10 days?	Are you feeling ill?	Record temperature. If >100.4 stay home	Short of breath Short of breath Difficulty breathing Chills Fatigue Muscle ache Congestion/runny nose Sore throat Headache New loss of taste or smell Nausea Vomiting Diarrhea

Appendix D: STUDENT SYMPTOM CHECKER

For Clinic Assessment Prince George County Schools

Student Name:		DOB:					
School Site:	Grade:	:	Teac	her:			
Student complaint (Include duration, precipitating factors):							
Student Health	Problem(s) (as noted in Se	chool l	Health System or as stat	ed by student/parent):			
Student Medica	tion Orders (indicate eithe	er on fil	e in the health office or a	at home):			
Has the student	t been around someone w	ith CO	VID-19 in the past 10 da	ys?			
Student Vitals:	Temperature:		O2:	HR:			
	Respiration:		BP:				
Symptoms (Mar	rk all observed):						
□ Non-product	tive cough						
☐ Shortness of	f breath (circle all that app	oly)					
O Gasp	oing	0	Slow				
O Grun	iting	0	Shallow				
O Whe	ezing	0	Nasal Flaring				
O Rapio	d	0	Thoracic Contracture				
Fever (above							
`	•						
O Chills		0	Shivering				
☐ Skin (circle a	all that apply)						
O Pink		0	Sweating				
O Pale		0	Red				
O White	е	0	Swollen				
O Dry		0	Rash				
Headache							
O Loca	ition:	Pa	ain Rating (1-5)				
☐ Sore Throat	_						
O Redr	ness O E	Inlarge	ed Tonsils O \	White Spots			
☐ New loss of smell or taste ☐ Gastrointestinal symptoms Add a section for Authorized Health Care Provider							
to	to evaluate and clear student to return to the school environment.						
(Included in Footer School Nurse Called, Parent Contacted, Documented)							
,				,			

Appendix E: UNLICENSED ASSISTIVE PERSONNEL (UAP)

CLINIC RESOURCE

Resource Based on Symptoms

Non-Respiratory Condition

Gastrointestinal

- Consider the use of gowns, mask/facial shield, and protective eye wear in the case of active or impending emesis (vomiting).
- Move the student to a separate isolation area in the case of active vomiting.
- If without fever, appropriate isolation to curtained-off cot rather than separate isolation room.
- Contact the parent to take the student home.

Integumentary (Skin Rash, Skin Eruptions, Breaks in Skin etc.)

- Standard precautions evaluate the need of escalation of PPE dependent on clinical picture. (draining wounds, potential exposure to blood borne pathogens).
- Use of gloves, mask /face shield protective eyewear dependent on drainage.
- Cleanse and cover wound, if draining.
- Contact parent/guardian to take the student home if possibly contagious (this
 doesn't include lice can remain in school until the end of day and return once
 treated at home).
- If a student is uncomfortable and unable to return to class, contact the parent to take home.

Injury possible concussion or broken limb

- Use of face covering and additional PPE as needed.
- Elevate, immobilize affected areas and apply ice. Apply splint if available.
- If persistent pain, inability to bear weight, swelling or bruising or headache contact parent/guardian to take the student home. Recommend further medical evaluation.

Miscellaneous

- Use clinical judgement to evaluate the risk of exposure and implement appropriate PPE. Sore throat, muscle aches, etc.
- ALWAYS ask individuals if they have been exposed to someone with positive or presumed positive COVID-19 (see prior sections related to PPEs, transfer to isolation room and notifications).
- If a student has persistent complaints and your assessment is that the student should not return to class contact the parent to come and take the student home.

Respiratory Condition and Afebrile (No Fever)

Upper Respiratory Complaint

Determine if acute respiratory illness or chronic condition exacerbation.

Allergy and asthma symptoms are NOT acute respiratory illnesses.

- Consider face covering and standard PPE.
- Evaluate if the individual has been exposed to someone with positive or presumed positive COVID-19.
- Per <u>CDC</u>, "Patients with even mild symptoms that might be consistent with COVID-19 (e.g., cough, sore throat, shortness of breath, muscle aches) should be cared for by HCP wearing <u>all recommended PPE</u> for the patient encounter (gloves, a gown, respiratory protection that is at least as protective as a fit tested NIOSH-certified disposable N95 filtering facepiece respirator or facemask—if a respirator is not available—and eye protection".

Respiratory Condition and Fever

- Per the CDC and NASN, "The use of facemasks for persons with respiratory symptoms and fever over 100.4F is recommended if available and tolerated by the person and developmentally appropriate."
- Investigate if the individual has been exposed to a person with positive or presumed positive COVID-19. Although symptoms are individualized and variable, sometimes even asymptomatic, the CDC has recognized that the primary symptoms are FEVER, COUGH, and SHORTNESS OF BREATH.
- If possibly presenting with COVID-19 symptoms, have the individual wear a mask and take them to an isolation room.
- Per <u>CDC</u>, "If the patient is wearing a facemask or cloth face covering, no
 recommendation for PPE is made typically for HCP transporting patients with a
 respiratory infection from the patient's room to the destination." (i.e. to an isolation
 room or to home with a parent). However, if transport time is delayed and care
 rendered FULL PPE should be worn. This should be modified for a school or
 community setting.
- Isolate the student with a Health Care Provider in a separate area until the parent comes to pick them up.

Appendix F: SCHOOL ENTRANCE PHYSICALS AND IMMUNIZATIONS

VA Department of Education Superintendent's Memo posted 5/29/20 (link below)

Superintendent's Memo: 132-20: Student Enrollment Requirements for Reentry

FROM: Dr. James Lane

SUBJECT: Health Requirements For Enrollment Reentry

The Virginia Department of Education (VDOE) encourages school divisions to communicate the importance of getting immunizations and physicals required for school enrollment to parents or guardians of school-age children. Although the COVID-19 pandemic initially disrupted or limited services offered by local health departments and providers, the Virginia Department of Health (VDH) and the American Academy of Pediatrics (AAP) recommend that parents proceed with well-child physicals and immunizations through their local health care providers. Planning ahead to complete these state requirements for school enrollment will ensure a smooth and safe start when schools reopen.

The Code of Virginia requires that children receive a comprehensive physical examination

(§ 22.1-270) within 12 months prior to the start of school and be adequately immunized (§ 22.1-271.2) before entering public kindergarten or elementary school. Other required immunizations include Human Papillomavirus (HPV) for girls entering sixth grade; and a Diphtheria, Tetanus, and Pertussis (Tdap) booster for entry into seventh grade. These requirements have **NOT** been waived and families are encouraged to make appointments with their pediatrician or primary care provider now to avoid the "back to school rush". This is particularly important, as it appears that rates of routine childhood immunizations have dropped during the pandemic.

Additional resources are available for families of uninsured and underinsured children or those impacted financially by the COVID-19 pandemic.

- The VDH, <u>Vaccines for Children (VFC) map</u> indicates participating providers for immunizations by region. Parents may contact local clinics directly for information and hours of service.
- The <u>Virginia Community Healthcare Association</u> works with a statewide network of clinics that bill for public and some private insurance. Many clinics provide a sliding scale for those without insurance and offer free immunizations in partnership with the VDH.
- The <u>Virginia Association of Free Clinics</u> are independent, nonprofit, volunteer-driven and community-based organizations. Each clinic sets its own eligibility requirements and guidelines, and all must be contacted directly for assistance.

School divisions are reminded that children of military families, without documentation of immunizations, should be immediately enrolled and shall have up to 30 days from the date of enrollment to obtain any immunizations required by the receiving state. The Interstate Compact on the Educational Opportunity of Military Children (§ 22.1-360) does not waive the physical examination requirement for these children. If the pupil's health record indicates that a physical was conducted prior to admission to another school or school division then the receiving school is

permitted to use such a report when enrolling the student (§ 22.1-270). School divisions should consider the current challenges that military families may face in scheduling physical examinations

as a result of COVID-19 and find ways to support families in securing the required physicals.

Regular requirements for physicals and immunizations do not impact the immediate enrollment mandate in the *McKinney-Vento Act* for students experiencing homelessness. Students who are eligible for McKinney-Vento rights and services should be immediately enrolled unless additional requirements, specifically implemented to address the pandemic, are being placed on all students. In such cases, the additional requirements would apply as comparable requirements. The student/family should be referred to the <u>Local Homeless Education Liaison</u> who can ensure the family receives assistance with any barriers caused by the requirements, including connecting the family with additional community services.

If you have additional questions, please contact Tracy White, School Health Specialist at VDOE, by email at Tracy.White@doe.virginia.gov, or by telephone at (804) 786-8671 or Joanna Pitts, School Health Specialist at VDH, by email at Joanna.Pitts@vdh.virginia.gov.

Appendix G: COVID-19 REFERENCE LIST

Compiled by M. Strawhacker MPH, BSN, RN American Academy of Pediatrics. (2020, May 5). Critical updates on COVID-19. COVID-19 Planning considerations: Return to in-person education in schools.

https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/covid-19-planning-considerations-return-to-in-person-education-in-schools/

Centers for Disease Control and Prevention. (2020, March 20). Coronavirus Disease 2019. (COVID-19) Symptoms of Coronavirus.

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Centers for Disease Control and Prevention. (June 2, 2020). Frequently asked Questions. https://www.cdc.gov/coronavirus/2019-ncov/fag.html

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Centers for Disease Control and Prevention. (2020, March 19). Interim Guidance for Administrators of US K-12 Schools and Childcare Programs. Plan, prepare, and respond to Coronavirus Disease 2019(COVID-19)

https://www.cdc.gov/coronavirus/2019- ncov/community/schools-childcare/guidance-for-schools.html

Center for Disease Control and Prevention. (2020, May 3). Symptom Based Strategy to Discontinue Isolation for Persons with COVID-19 https://www.cdc.gov/coronavirus/2019-ncov/community/strategy-discontinue-isolation.html

COVID 19 Reference List Compiled by M. Strawhacker MPH, BSN, RN Kampf, G., Todt, D., Pfaender, S., & Steinmann, E. (2020). Persistence of coronaviruses on inanimate surfaces and their inactivation with biocidal agents. Journal of Hospital Infection, 104(3), 246–251. doi: 10.1016/j.jhin.2020.01.022

National Association of School Nurses. (2020). COVID-19 Web resource Page. https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19

Select PDF Downloads:

Interim Guidance: Role of the School Nurse in Return to School Planning Guidance for School Nurses to Safely Send and Receive Resources Between School and Home During COVID-19 Considerations for School Nurses Regarding Care of Students and Staff that Become III at School or Arrive Sick Facemask Considerations for Healthcare Professionals in Schools

Recover, Redesign, Restart (June, 2020) Virginia Department of Education. http://www.doe.virginia.gov/support/health_medical/covid-19/recover-redesign-restart.shtml#

Appendix H. MENTAL HEALTH SUPPORTS

1. Mental Health Supports for Staff:

- **a.** The Employee Assistance Program (EAP) is available for staff who have PG Schools Health Insurance.
- b. Professional Development is offered throughout the school year on various topics to include support and training for the Return to Learn plan for all teachers and staff.
- c. Directors, Supervisors, and School Leaders were trained by Human Resources for supporting teachers and staff on COVID-19 related health concerns or issues. Human Resources is implementing the Families First Coronavirus Response Act for eligible staff members under emergency paid sick leave or expanded family medical leave coverage related to COVID-19. As any concerns are presented by staff members, HR, the Coordinator of Health Services, Social Workers, School Psychologists and School Counselors are all available for consultation of needs and reference to any identified support mechanisms needed.

2. Mental Health Supports for Students:

a. Mental Health Staff:

- i. <u>School Counselors</u> are assigned to every school building.
 - **a.** Five Elementary Schools each have one full time school counselor
 - **a.** Provide weekly school guidance lessons in classrooms on rotating basis in the areas of social emotional learning
 - **b.** Provide individual and group counseling opportunities for students in need of extra support
 - **c.** Provide crisis intervention for suspected suicidal students when needed.
 - **d.** Mandated reporters for child abuse and neglect.
 - **e.** Please see Appendix for sample of Social Emotional Learning daily activities provided to parents upon request
 - **b.** Secondary Schools counselors provide individual counseling in the area of social emotional development, suicide intervention, career counseling, along with scheduling of classes when needed.
 - **a.** Moore Middle School (Gr 6-7) have two full time school counselors (1 counselor is 12 month) and one full time counselor shared with Prince George Education Center
 - **b.** Clements Jr. High Annex (Gr. 8-9) have three full time school counselors
 - **c.** Prince George High School (Gr. 10-12) have four full time school counselors

ii. Student Services Support Staff:

- **a.** <u>School Psychologists</u> 4 full time school psychologists are assigned to the 8 full services schools and 1 alternative school
 - **a.** Provide support services to staff in the area of professional development and consultation
 - b. Provide support services to students in the area of psychological assessments as part of the special education evaluation process, mental

- health assessments as part of a threat assessment process, social emotional skill development, and individual and group counseling. In addition to crisis intervention, the suicide prevention guidelines include designated mental health supports.
- **c.** Provide support services to parents in the areas of consultation and available community resources.
- **d.** Mandated reporters for child abuse and neglect. Provide consultation to school staff in the area of child abuse and neglect.
- **b.** School Social Workers 3 full time school social workers assigned to the schools in the school district; Visiting Teacher 1 full time visiting teacher assigned to the schools in the school district
 - **a.** Provide support services to staff in the areas of professional development and consultation.
 - **b.** Provide support services to students in the areas of sociological assessments (high school level students), FAPT/CSA case management, individual and group counseling along with crisis intervention as part of the suicide prevention guidelines with other designated mental health supports.
 - **c.** Provide support services to parents in the areas of sociological assessments as part of the special education evaluation process and provide community resources.
 - **d.** Mandated reporters for child abuse and neglect. Provide consultation to school staff about child abuse and neglect.

iii. Other Available Community Resources

a. Prince George County Schools access available community mental health resources when available (i.e. Military Counseling – MFLC; Therapeutic Day Treatment (TDT), Community Services Board 19 Crisis Intervention Counseling/Intervention)

Appendix I: FAMILIES FIRST CORONAVIRUS RESPONSE ACT

All PGCPS Employees:

The purpose of this communication is to inform employees and provide a brief overview of legislation known as the **Families First Coronavirus Response Act** recently signed into law by the federal government. The purpose of the legislation is to provide job protection and continuity of income to employees affected by the COVID-19 pandemic.

This legislation establishes **two new laws** that will be in effect **from April 1, 2020 through December 31, 2020**:

- 1. The Emergency Family and Medical Leave Expansion Act (EFMLEA)
- 2. The Emergency Paid Sick Leave Act (EPSLA)

The Family and Medical Leave Expansion Act (FMLA+)

What is it?

An extension of the current benefits provided under the Family Medical Leave Act (FMLA) that provides job protection for employees who cannot work or telework because they need to care for a minor child whose school is closed or whose childcare provider is closed or unavailable because of COVID-19.

Who is covered?

Full-time and permanent part-time employees who have been employed by PGCPS for thirty (30) calendar days prior to the day your EFMLEA leave would begin.

What are the benefits?

The benefits include up to 12 weeks of job protected leave. See attached Department of Labor poster for paid leave entitlements.

How do I access the benefits?

Employees who feel they meet the criteria should contact HR to complete the application process.

The Emergency Paid Sick Leave Act (EPSLA)

What is it?

The EPSLA provides paid sick leave for employees who meet the following criteria:

- 1. The employee is under quarantine or isolation as required by federal, state, or local order;
- 2. The employee is under self-quarantine as advised by a medical provider;

- 3. The employee has COVID-19 symptoms and is seeking a medical diagnosis;
- 4. The employee is caring for someone who is quarantined;
- 5. The employee is caring for a minor child whose school or childcare provider is closed or unavailable because of COVID-191; or
- 6. The employee has any other substantially-similar condition specified by the Secretary of Health and Human Services, in consultation with the Secretaries of Labor and Treasury.

Who is covered?

All full-time and permanent part-time employees (restrictions apply), regardless of start date, who meet one or more of the criteria listed above.

What is the benefit?

The benefit includes continuity of current pay or prorated pay based on the reason for the absence per the criteria listed above. See attached Department of Labor poster for paid leave entitlements for eligible employees.

How do I access the benefits?

Employees who feel they meet the criteria should contact HR to complete the application process.

How do I find out more about FMLA+ and EPSLA

For detailed information about the legislation, please refer to the attached Department of Labor poster that is required to be shared with all employees. Additionally, please refer to the Department of Labor's Frequently Asked Questions.

Please contact Human Resources or the Coordinator of Health Services with any questions.

EMPLOYEE RIGHTS

PAID SICK LEAVE AND EXPANDED FAMILY AND MEDICAL LEAVE UNDER THE FAMILIES FIRST CORONAVIRUS RESPONSE ACT

The Families First Coronavirus Response Act (FFCRA or Act) requires certain employers to provide their employees with paid sick leave and expanded family and medical leave for specified reasons related to COVID-19. These provisions will apply from April 1, 2020 through December 31, 2020.

► PAID LEAVE ENTITLEMENTS

Generally, employers covered under the Act must provide employees:

Up to two weeks (80 hours, or a part-time employee's two-week equivalent) of paid sick leave based on the higher of their regular rate of pay, or the applicable state or Federal minimum wage, paid at

- 100% for qualifying reasons #1-3 below, up to \$511 daily and \$5,110 total;
- 34 for qualifying reasons #4 and 6 below, up to \$200 daily and \$2,000 total; and
- Up to 12 weeks of paid sick leave and expanded family and medical leave paid at % for qualifying reason #5 below for up to \$200 daily and \$12,000 total.

A part-time employee is eligible for leave for the number of hours that the employee is normally scheduled to work over that period.

► ELIGIBLE EMPLOYEES

In general, employees of private sector employers with fewer than 500 employees, and certain public sector employers, are eligible for up to two weeks of fully or partially paid sick leave for COVID-19 related reasons (see below). Employees who have been employed for at least 30 days prior to their leave request may be eligible for up to an additional 10 weeks of partially paid expanded family and medical leave for reason #5 below.

QUALIFYING REASONS FOR LEAVE RELATED TO COVID-19

An employee is entitled to take leave related to COVID-19 if the employee is unable to work, including unable to telework, because the employee:

- is subject to a Federal, State, or local quarantine or isolation order related to COVID-19:
- has been advised by a health care provider to self-quarantine related to COVID-19;
- is experiencing COVID-19 symptoms and is seeking a medical diagnosis;
- is caring for an individual subject to an order described in (1) or self-quarantine as described in (2);
- is carring for his or her child whose school or place of care is closed (or child care provider is unavailable) due to COVID-19 related reasons; or
- is experiencing any other substantially-similar condition specified by the U.S. Department of Health and Human Services.

► ENFORCEMENT

The U.S. Department of Labor's Wage and Hour Division (WHD) has the authority to investigate and enforce compliance with the FFCRA. Employers may not discharge, discipline, or otherwise discriminate against any employee who lawfully takes paid sick leave or expanded family and medical leave under the FFCRA, files a complaint, or institutes a proceeding under or related to this Act. Employers in violation of the provisions of the FFCRA will be subject to penalties and enforcement by WHD.



For additional information or to file a complaint:
1-866-487-9243
TTY: 1-877-889-5627
dol.qov/a gencies/whd



WHI 422 PEV 09/20