

Appendix C

LEA Plan for Safe Return to In-Person Instruction and Continuity of Services

This optional template may be used by the LEA to comply with Section 2001(i)(1) of the ARP Act and U.S. Department of Education's Interim Final Rule requiring each LEA that receives ARP ESSER III funds to submit a plan that describes how it will safely return to in-person instruction and ensure continuity of services, including LEAs that have already returned to in-person instruction. The LEA is not required to use this template but should include all of the template elements in the LEA Plan for Safe Return to In-Person Instruction and Continuity of Services that it develops and publishes on its website. The plan should be published on the LEA's website by June 1, 2021.

Pulaski County Public Schools
202 North Washington Avenue
Pulaski, VA 24301

Section 1: Introduction

The purpose of the American Rescue Plan (ARP) Act Elementary and Secondary School Emergency Relief (ESSER) III Fund is to help safely reopen and sustain the safe operation of schools and address the impacts of COVID-19 on the nation's students by addressing students' **academic, social, emotional, and mental health needs**. This plan describes how Pulaski County Public Schools will maintain the health and safety of students, educators, and other school and division staff during and following the return to full in-person instruction. Questions about this plan should be directed to Mary Hall, BSN, RN, Supervisor of School Nurses.

Pulaski County Public Schools (PCPS) were closed on March 13, 2020 due to the COVID-19 pandemic. On June 8, 2020, PCPS sent out invitations to administrators, staff, students, parents, and community members to be a part of our task force to begin planning for how to safely reopen and sustain the safe operation of schools in our district for in-person learning. Task force was organized and Zoom meeting dates sent to all. After completing our task force meetings, we began to prepare our School Health Plan for reopening schools using input from task force members and guidelines from the Virginia Department of Education (VDOE), and the Center for Disease Control (CDC). Our Health Plan for Reopening of Schools was approved by our local School Board and submitted to VDOE in July 2020. Throughout the school year as more information on COVID-19 has become known and CDC guidelines have been updated we have continued to review and revise our school health plan as needed to align with CDC recommendations. PCPS were fully in person for the 2021-2022 and 2022-2023 school years. PCPS plans to be fully in person for the upcoming 2023-2024 school year.

Pulaski County Public Schools Addendum to Health Plan

Our current Health Plan for Reopening Schools was written back in June 2020 and submitted to the Virginia Department of Education in early July. Since that time scientists, medical professionals, and Centers for Disease Control (CDC) have learned new information and have more understanding of COVID-19. We are updating our Health Plan to include some of this new guidance.

Symptom screenings will fail to identify some students who have COVID-19. PCPS will continue to use our Weekly Health Screening Form with the understanding that we may not be able to identify every student who may have COVID-19 because some who have the infection will not develop any signs or symptoms. Symptom screening does not provide enough information to diagnose someone with COVID-19.

As we have started our school year, we understand that the symptoms of COVID-19 are some of the same symptoms as other common illnesses such as seasonal allergies, colds, strep throat, and flu. Studies have shown that there is no symptom or set of symptoms that only occur in children diagnosed with COVID-19. Some students with chronic conditions like asthma and allergies may have symptoms like cough,

nasal congestion, and runny nose without having any infection at all. We started our year with a very cautious approach from the perspective that we could not distinguish who might have COVID-19 and have been sending students home for 10 school days. Schools and families need to work together to provide a safe learning environment and to protect the health of all students, families and school staff.

Health Screening at Home

1. Parents and caregivers should monitor their children for signs of infectious illness every day.
2. If your child has any of the following symptoms, it could indicate a possible illness that may decrease your child's ability to learn and put them at risk for spreading illness to others. **Do not send your child to school if he/she has any of the following:**
 - Temperature 100.4 or greater, chills, feels very warm, flushed appearance, sweating, or body aches
 - Sore throat, nasal congestion, runny nose
 - New uncontrolled cough that causes difficulty breathing (for students who have chronic allergies/asthmatic cough, a change in their cough from baseline)
 - Diarrhea, vomiting, abdominal pain/stomach ache
 - New onset of a severe headache, especially with fever
3. If your child has had close contact (within 6 feet of an infected person for at least 15 minutes) with a person with confirmed COVID-19 or members of your family have been asked to quarantine, then you should keep your child at home and notify the school nurse.

Health Screening at School

1. Upon arrival at school each day, students will report immediately to the teacher with whom they are scheduled to begin their day. The teacher will conduct a temperature check and a brief screening using the PCPS health screening instrument.
2. Students who are identified as having symptoms will be referred to the school nurse and the school nurse will assess and evaluate each student.
3. The school nurse after observing and assessing the students for any symptoms of any infectious illness will either send the student back to class or call a parent/guardian to pick up the child from school.
4. If the student has any symptoms of any infectious illness they should stay home from school and follow PCPS Health and Safety Guidelines ([click here for the Safety Guidelines](#)) to minimize transmission to others and to allow these symptoms to resolve (at least 24 hours without fever reducing medications or in accordance to existing Health and Safety Guidelines).
5. If the student presents to the isolation clinic with symptoms of COVID-19 they will be maintained in the isolation area until the parent can pick the student up and take them home. These students will be placed on home-based virtual instruction for a minimum of 10 school days. **Parents/guardians should consult with their healthcare provider for evaluation and determination if testing is recommended.**
6. If a parent/guardian chooses to appeal the 10 school days at home restriction, they must follow-up with the student's healthcare provider and provide written documentation that includes an alternate diagnosis and/or a negative COVID test to Mary Hall. When received, the appeal request will be reviewed by Mary Hall and Mary Rash to determine if the student may return to school.
7. Appeal contact information: Mary Hall, mahall@pcva.us or 540 643-0531
Mary Rash, mrash@pcva.us or 540 994-2515

What to do if your child Becomes Sick or has a COVID-19 Diagnosis

1. If your child receives a **negative** COVID-19 test result, your child may return to school following the existing PCPS Health and Safety Guidelines. Please provide a copy of the negative test result to your child's school nurse upon return to school.

2. If your child receives a **positive** COVID-19 test result.
 - Your child will need to stay home (isolate) and separate themselves from others in the home as much as possible.
 - The local health department will contact you with instructions for what you should do and about how to notify any close contacts about possible exposure (contact tracing).
 - The local health department may request that members of your household quarantine for 14 days.
 - Your child may return to school after meeting all of the following **three** criteria:
 1. At least 10 days since symptoms appeared
 2. At least 24 hours with no fever-reducing medication
 3. Symptoms have improved
 - 3. As soon as your child feels well enough they can join home-based virtual instruction and continue until they finish their isolation and can return to school.
 - 4. Please call your child's school nurse if your child has been diagnosed with COVID-19

What to do if your child has been potentially exposed to COVID-19

1. Your child needs to have been in close contact with a person who has COVID-19 while they are contagious to become infected. Close contact includes:
 - Living with person who has COVID-19
 - Providing care for a person who has COVID-19
 - Being within 6 feet of a person who has COVID-19 for at least 15 minutes
 - Having exposure to respiratory secretions (e.g., being coughed or sneezed on, sharing a drinking glass or utensils; kissing).
2. A person with COVID-19 is considered to be contagious starting from 2 days before they become sick (or 2 days before they tested positive if they never had symptoms) until they meet the criteria to discontinue isolation.
3. **Quarantine** is used to keep someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent the spread of disease that can occur before a person knows they are sick or if they are infected with the virus and have no symptoms.
4. If you have been told, by your local health department that your child needs to be quarantined, they will instruct you on when the 14 days will end and your child can return to school.
 - Your child needs to stay home for 14 days after the last contact with a person who has COVID-19.
 - Monitor your child for fever (100.4), shortness of breath, or other symptoms of COVID-19 and call your healthcare provider for guidance.
 - If possible, your child needs to stay away from others, especially people who are at higher risk for getting very sick from COVID-19.
 - Even if your child tests negative for COVID-19 or feels healthy, they should stay home for the 14 days (quarantine) since symptoms may appear 2 to 14 days after exposure to the virus.
5. Your child will be placed on home-based virtual instruction until they finish their quarantine and can return to school.
6. Please call your child's school nurse if your child has been told to quarantine.

Resources:

https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/symptom-screening.html?deliveryName=USCDC_2067-DM33891

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/student-becomes-sick-diagnosis-flowchart.html>

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

<https://www.vdh.virginia.gov/content/uploads/sites/182/2020/08/Evaluating-Symptoms-in-a-Child.pdf>

<https://www.vdh.virginia.gov/coronavirus/local-exposure/>

Section 2: Maintaining Health and Safety

Pulaski County Public Schools has taken and will continue to take actions to ensure the health and safety of students, educators, and other school and division staff during and following the return to full in-person instruction. A description of actions already taken and additional actions planned is below.

Pulaski County Public Schools in June 2020 started working on their return to in-person school plan in partnership and collaboration with the local health department (New River Health District), Virginia Department of Health, VDOE, Center for Disease Control (CDC) and Governor of Virginia executive mandates. VDOE published a document, Recover, Redesign, Restart 2020 for Virginia school divisions in response to the COVID-19 pandemic. This document addressed all facets of school operations and includes key questions, resources, and recommendations for school leaders for reopening schools including all parameters set forth by the Governor of Virginia. PCPS used this document as a guide to develop our School Health plan.

Key elements of our plan include:

- I. School nurses monitoring all student and staff for any illnesses and any COVID-19 concerns which includes providing education to promote behaviors that help reduce the transmission of COVID-19. These include infection control measures, health hygiene practices including handwashing and respiratory etiquette, use of face coverings, and physical distancing. Appropriate signage is posted throughout all our school buildings to remind students and staff about handwashing, respiratory etiquette, and physical distancing. All staff and students will be screened daily and this will be documented on Health Screening Log. *(A weekly health log is completed for each staff member and student)

Pulaski County Public Schools

Protocol for Daily Health Checks and School Exclusion

Staff and students need to be screened upon arrival for symptoms and history of exposure to COVID-19. PCPS must treat all staff and students who have any signs and symptoms of COVID-19 as potentially positive for COVID-19 and we must follow Universal Precautions to try to reduce the risk of transmission of COVID-19 to others.

Symptoms of COVID-19: (This is not all the possible symptoms of COVID-19)

- Fever (100.4 degrees F or higher) or chills
 - Cough, congestion or runny nose
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Nausea or vomiting
 - Diarrhea
 - Pink or red eyes, enlarged lymph nodes on one side of neck, cracked lips, red tongue, and rash may be symptoms of a more serious disease (MIS-C) in children.
1. Parents/guardians are asked to do a wellbeing check at home on their child at the start of the day and not send them to school if they are having any symptoms of COVID-19. Parents/guardians should contact their healthcare provider/local health department if their child is ill or having symptoms of COVID-19 for evaluation, treatment and information about when they can return to school.

2. Staff should stay at home if they are sick or having any of the above symptoms. They need to contact their healthcare provider/local health department for evaluation, treatment and information about when they can return to work.

Student screening at school will include:

1. Upon arrival to school students will report immediately to their classrooms. Staff will check students for symptoms which includes a temperature check. Staff will observe students throughout the day and refer students who may be symptomatic to school nurse. (**According to the CDC, children may be less likely to have fever, may be less likely to present with fever as an initial symptom, and may only have gastrointestinal tract symptoms.**)
 2. Staff will use non-contact thermometers and will use PPE including mask and gloves.
 3. Students who report with any signs/symptoms or have a temperature of 100.4 degrees F or higher will be immediately taken to the isolation area. Student will remain in isolation with continued supervision and care until picked up by parent.
 4. Student will be asked to wear a face covering and must maintain 6 feet physical distancing while in isolation area.
 5. Parent will be called to pick up their child at school as soon as possible. When the parent arrives at school they will need to call the office and student will be walked out to waiting parent.
 6. Parent should be encouraged to contact their health care provider to discuss testing and medical care.
 7. Student may return to school when the local health department or the student's healthcare provider provides written documentation they are cleared to come back to school or at least 24 hours with no fever without fever-reducing medication **and** at least 10 days since symptoms first appeared **and** symptoms have improved.
- Any screening must take into account students with disabilities and accommodations that may be needed in the screening process for those students.

Staff Screening

1. All staff will do a daily self-symptom check prior to coming to work and staff will complete a screening form with temperature check each day as soon as they arrive at their work location.
 2. Any staff who become sick or develop a temperature of 100.4 degrees F or higher will be isolated from others and need to go home as soon as possible.
 3. Staff may return to work when local health department or their healthcare provider provides written documentation they are cleared to come back to work or at least 24 hours with no fever-reducing medication **and** at least 10 days since symptoms first appeared **and** symptoms have improved.
- <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>
<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html>

- II. Monitoring absenteeism especially for any large increases in respiratory illnesses and/or other trends and how we will work with the local health department to decide what course of action we will take. Our school nurses continue to monitor absences each school day.

- III. Education, orientation and training for all staff and students specific to COVID-19 protocols/procedures before returning to in-person education. This education included when parents should keep their children at home and when they could safely return to in-person school. All this was posted on the district webpage.

https://docs.google.com/presentation/d/1kHXkiOA3GmYcp5DPJc-O0FKqCJzbYNneeYEwnGnC7m0/edit#slide=id.ga5b203df53_0_832 is a power point presentation that was required for all our staff to watch to reinforce COVID mitigation strategies.

- IV. Communication with all staff, students, parents/guardians about all COVID-19 mitigation strategies and how we would monitor these. This communication plan was released to all staff, students, and parents/guardians in early August to allow time for parents/guardians to

make plans for sending their children back to school (September 8,2020) and help to reduce some of the fears, anxiety and concern about returning to in-person learning. This communication was sent via letters, emails, social media postings, local newspapers, and posted on the district webpage.

Pulaski County Public Schools COVID-19 Information

Our priority is ensuring that students and staff have as safe and healthy learning environments as possible to return to school this fall.

There is a lot of information and misinformation circulating about the transmission of COVID-19, and we are committed to continuing to provide up to date information based on the latest research. We are receiving guidance from Centers of Disease Control (CDC), Virginia Department of Education (VDOE), Virginia Department of Health (VDH), VDOE School Health Specialist and Dr. Bissell, New River Health Director.

Signs and Symptoms of COVID-19 include:

- Fever or chills (100.4 degrees F)
- Cough, Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- Sore throat
- Congestion or runny nose
- New loss of taste or smell
- Nausea or vomiting, diarrhea

This list does not include all possible symptoms. CDC continues to update this list as we learn more.

Students and staff will be screened for symptoms and history of exposure each day upon arrival to school. We must treat all students and staff who have any symptoms of COVID-19 as potentially positive for COVID-19 so we will send them home. Parents/guardians should do a wellbeing check at home on their child each morning **and not send them to school if they are having any symptoms of COVID-19.** Parents/guardians should contact their health care provider/local health department if their child is sick or having symptoms of COVID-19 for evaluation, treatment and information about when they can return to school.

Teachers and staff should stay home if they are sick or having any symptoms of COVID-19.,

1. Parent/guardian will need to notify their child's school each morning by 9:00 a.m. if they are sick or will not be at school. The school nurse will coordinate with secretary to monitor school absenteeism. Administration will be notified of any large increase in student/staff absences and local health department will also be notified.
2. Any cases of COVID-19 will be reported to the New River Health District and PCPS will follow their guidance on how to manage these cases.

COVID-19 is thought to spread mainly through close contact from person to person through respiratory droplets generated by coughing, sneezing, singing, and talking from an infected person. PCPS is using the following strategies to prevent the spread of COVID-19:

1. **Mask/Face coverings-** masks/face coverings protect the general public against COVID-19 infection. Parents/guardians should provide their child with face coverings. Reusable masks/face coverings provided by families should be washed daily.
2. **Physical distancing** - is another practice that helps to mitigate transmission of the virus. Students and staff will maintain a minimum 3 feet and aim for 6 feet when feasible.
3. **Screening** all students and staff upon entry each day.
4. **Cough etiquette** - Cover your mouth and nose with a tissue when coughing or sneezing. If you don't have a tissue use your elbow.

5. **Handwashing** –is the single most effective infection control measure because it removes the virus. **Hands should be washed frequently during the day with soap and water for at least 20 seconds.**
6. **Hand sanitizing**-if handwashing is not feasible, hand sanitizer with at least 60 percent ethanol or 70 percent isopropanol content can be used.
7. **Isolation area**- each school will have an isolation space available for any students who have symptoms of COVID-19 at school to minimize transmission until they are sent home.
8. **School Health Clinics** – will be maintained by the school nurse as a well student area for those students that have scheduled medical needs and injuries. School nurses will be wearing appropriate personal protection equipment (PPE).

Students and staff who have symptoms of COVID-19 and were directed to care for themselves at home may return under the following conditions:

- At least 2 days (24 hours) have passed since recovery defined as no fever without use of fever-reducing medications; **and** improvement in symptoms **and**
- At least 10 days have passed since symptoms first appeared.

Students and staff returning to school after an absence due to COVID-19 related illness may return to school with the following criteria met:

- at least 2 days (24 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; **and** improvement in symptoms; **and**
- At least 10 days have passed since symptoms first appeared
- Healthcare provider notice to allow student's return to school.

PCPS Guidelines for Keeping Your Child Home to Prevent the Spread of COVID-19 in Our Schools

These are general COVID-19 prevention tips that are important for everyone to know and follow consistently. This includes steps everyone should take to prevent COVID-19, what to do if a child has a fever, and what to do if a child has been exposed to someone who is sick with COVID-19. Steps Everyone Should Take to Slow the Spread of COVID-19:

- Physical distancing – maintain 6 feet from others
- Wear a mask over both your nose and mouth in public settings and when around people who do not live in your household.

Steps Everyone Should Take to Prevent Disease and Protect Others:

- Avoid crowds when indoors and outdoors
- Wash hands or use hand sanitizer frequently
- Clean and disinfect frequently touched surfaces
- Stay at home and away from others if symptoms develop

If your child has a fever, they **should not** go to school or childcare. If the fever goes away after taking fever-reducing medicine (for example, acetaminophen/Tylenol or ibuprofen/Motrin), the child still needs to stay home. The child should be kept home and away from others until the fever has been gone for at least 24 hours without the use of fever-reducing medicine. Other illness symptoms (such as cough or runny nose) should also be improved before the child goes back to school or childcare.

If your child has had close contact with someone who has or might have, COVID-19 they must stay away from others. Close contact means anyone who has been within 6 feet of the sick person for a total of 15 minutes or more over 24 hours or anyone who has had contact with the person's respiratory secretions from the mouth or nose. **Typically, close contacts include all the people who live in the same house.**

It can take up to 14 days for a person who has been exposed to the virus that causes COVID-19 to start having any signs or symptoms of illness. Because of this, close contact of a person who has, or might have, COVID-19 should stay home (quarantine) and monitor for symptoms for 14 days after their last exposure. This is the safest option.

Parents/Guardians:

Do Not Send your child to school if:

1. Your child has had close contact with someone who has COVID-19 in the last 14 days.

2. If a parent/guardian has been tested for COVID-19-do not send your child to school until you receive your test results. If test results are positive, your child will need to stay home and quarantine for 14 days and be free of any fever or other symptoms of COVID-19 before returning to school.
3. If your child is sick, mainly because the symptoms of COVID-19 are the same as the symptoms of other illnesses, including the common cold, influenza (flu), and gastroenteritis (vomiting and diarrhea, or a 'stomach bug,' parents and guardians should keep your child home for a day, take care of the child's symptoms, monitor for any change, and send the child back to school and/or child care when symptoms have improved. Calling and talking with the child's healthcare provider is encouraged.
4. If your child is tested for COVID-19 because of symptoms or close contact with someone with COVID-19, keep them home while waiting for the test results. Talk with your child's healthcare provider about when the child may return to school.

Parents/Guardians:

1. If you have any questions or concerns about when to send your child to school, please call and talk with the school nurse before sending your child to school.
2. If your child needs to stay home because they are sick or need to quarantine due to being exposed to a positive COVID-19 person's close contact, they will continue their school work through virtual learning.
3. Please call the school to let them know if your child will be absent from school

School Nurse Phone Numbers:

Dublin Elementary- 540 643-0713

Pulaski Elementary - 540 643-0933

Riverlawn Elementary- 540 643-0306

Critzer Elementary - 540 643-0567

Snowville Elementary - 540 643-0416

Pulaski County Middle- 540 643-0832

Pulaski County High- 540 643-0255 or 540 643-0364

Reference:

https://www.vdh.virginia.gov/content/uploads/sites/182/2020/10/Child-School_COVID-19_Booklet.pdf

- V. How cases or outbreaks of COVID-19 would be reported and how our district would manage any outbreaks, school closing or similar decisions such as a shutdown of school activities based on local health department recommendations. All positive cases of COVID-19 have been reported to PCPS Superintendent who then send this information out to all staff, parents and community.
- VI. School Health Services will maintain a well-student clinic for students who have scheduled medical needs (e.g. procedures, medications, injuries and other noncontagious health care needs). A separate isolation area will be maintained for all staff and students who come to school with any symptoms of COVID-19 or develop symptoms at school. School clinics and isolation area are stocked with the needed personal protective equipment (PPE)

Pulaski County Public Schools

School Nurse Health Clinic and First Aid Protocol

School health clinics will be maintained as a well student area for those students that have scheduled medical needs (etc. procedures, meds, injuries, etc.)

1. Teachers will need to contact the school nurse prior to sending any students to the office so they can be triaged and to prevent congregation in office and possible exposure to illness.
2. Teachers should make sure student is wearing a face covering if they report not feeling well before sending them to clinic.
3. If staff or students arrive at school clinic feeling ill with potentially COVID-19 symptoms they will be relocated immediately to the isolation area so as not to "contaminate" the health clinic.

4. To the extent possible, students can provide self-care for minor first aid situations with teacher direction and physical distancing. Each classroom will be provided a supply of gloves and Band-Aids.

Appropriate Office Visit	Consider classroom-based
<ul style="list-style-type: none"> ▪ Symptoms of COVID-19 ▪ Scheduled medications; allow physical distancing; stagger times ▪ Avulsed tooth, dental injuries ▪ Scheduled Specialized Physical Health Care Procedures <ul style="list-style-type: none"> • Diabetic Care • Catheterization • G-tube Feedings ▪ Altered levels of consciousness/concussion ▪ Difficulty breathing ▪ Head injury/complaining of neck pain-DO NOT move, keep student calm. Call 9-1-1 ▪ Sudden vision impairment ▪ Diabetic “lows” or unconscious ▪ SEVERE bleeding or other traumatic injury; Call 9-1-1 ▪ Severe abdominal /groin pain ▪ Seizure (uncontrolled movement) do not hold down, remove objects that may cause injury ▪ Signs and symptoms of Multisystem Inflammatory Syndrome in Children (MIS-C), which may include rash, swollen red eyes, hands and feet. 	<ul style="list-style-type: none"> ▪ Minor toothache/loose tooth ▪ Small paper cuts, abrasions, picked scabs ▪ Wound care/ice pack for small bumps/bruises ▪ Localized bug bites ▪ Readily controlled nosebleeds, where student can deliver self-care ▪ Anxiety/stress issues, try calming techniques and/or call school guidance counselor ▪ Chapped lips

5. School nurse will wear appropriate medical PPE while providing care to students and staff.
6. School health clinic environmental surfaces and shared equipment will be cleaned and disinfected after each student/staff visit and before the clinic is used for another student/staff.
- 7.

Medication Administration at School

1. A Letter should be sent home to all parents explaining that students that must take medication during school will need to make an appointment with the school nurse prior to the start of school to bring the medication in so that delivery time may be staggered. Parent must wear face covering and complete screening with temperature check when bringing medication to school.
2. Parents will bring in the medication coupled with the physician's/health care provider's order to the school nurse.
 - Medication must be in your student's original, pharmacy-labeled container or a sealed over-the-counter container.
 - Any scored tablets requiring partial doses (1/2 or 1/4) must be sent to school already cut.
 - A separate medication authorization form is required for each medication.
3. Follow district policy for student medication required during the school day and appropriate forms, i.e. PCPS Medication Authorization Form
4. Current best practice is that nebulizer treatments will not be done in the school setting. Aerosol Generating Procedures (AGP) are those that are more likely to generate higher concentrations of infectious respiratory aerosols than coughing, sneezing, talking, or breathing. These procedures potentially put healthcare personnel at an increased risk for pathogen exposure and infection.

5. The School nurse needs to work with the student's health care provider and parents to switch to an inhaler with a space chamber. (Parent/Guardian will need to provide an Asthma Action Plan signed by healthcare provider and parent/guardian.)

Resources:

https://www.cdc.gov/coronavirus/2019-ncov/downloads/A_FS_HCP_COVID19_PPE.pdf

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>
(updated 7-15-20)

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools-faq.html>

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

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/children.html>

- VII. Mental Health services will be addressed by our school guidance counselors and local community service agencies. New River Valley Community Services provide counselors in our schools. All staff have access to the Employee Assistance Program.

In addition, Pulaski County Public Schools has adopted policies on each of the following safety recommendations established by the Centers for Disease Control and Prevention (CDC).

- **Universal and correct wearing of masks**

Pulaski County Public Schools Protocol for Face Coverings

CDC recommends that all people wear cloth face coverings in public settings when around people outside of their household, especially when social distancing measures are difficult to maintain. Cloth face coverings may help prevent people who have COVID-19 from spreading the virus to others. COVID-19 can be spread by people who do not have symptoms and do not know that they are infected.

Cloth face coverings are recommended as a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people. Respiratory droplets containing the virus can spread when someone coughs, sneezes, talks, sings, or raises their voice.

The following should not wear a cloth face covering:

- Children younger than 2 years' old
- Anyone who has trouble breathing
- Anyone who is unconscious, incapacitated, or otherwise unable to remove the cloth face covering without assistance.

Pulaski County Schools protocol will include:

1. All staff and students need to wear face coverings while on school grounds.
2. All visitors will be required to wear face coverings when entering any school/district facility.
3. In the classroom setting where social distancing can take place (e.g. desks are 6 feet apart) face coverings may be removed while students are seated at desk but must be worn when moving about the classroom. ** (Best practice is that the masks be worn in classrooms at all times.)
4. Cloth face coverings must be worn on school bus at all times.
5. All staff and students must wear face coverings when in the hallways, bathrooms, and during parent drop off or pick up, or when standing in line at school.
6. Parents/Guardian need to provide face coverings for their children to wear at school each day.
7. Parents/Guardian must be responsible for washing the cloth face coverings each day after use.
8. Staff need to provide their own face coverings and wash them each day.
9. All staff, students and visitors must wear face coverings in the proper manner which means they must fit snugly, be secured with ties or ear loops, allow for breathing without restriction, and cover both nose and mouth.

10. A note from your health care provider will be required for all staff and students who are not able to wear a face covering due to a medical waiver. *(See addendum)
11. Any staff or student who refuses to wear face covering while on school grounds will be handle as a violation of policy. Students refusing to wear face coverings may be sent home and placed on virtual learning.
12. Transparent masks may be the best option for both teachers and students in classes for deaf and hard of hearing students. They may also be useful for teachers and younger students who rely on visual/facial cues.

Resources for Face Coverings:

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html> (updated 7-16-20)
<https://www.cdc.gov/coronavirus/2019-ncov/downloads/cloth-face-covering.pdf>
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wear-cloth-face-coverings.html>
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wash-cloth-face-coverings.html>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html> (updated 7-23-2020)
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/cloth-face-cover.html> (UPDATED 7-23-20)
https://www.cdc.gov/coronavirus/2019-ncov/downloads/community/CFC_Guide_for_School_Administrators.pdf

Addendum to Face Covering Protocol

As part of PCPS mitigation strategy all staff and students will wear face coverings while on school grounds.

- Face Shields are worn primarily for eye protection. Currently there is not enough evidence to support the effectiveness of face shields and if they provide protection from the spray of respiratory droplets.
- CDC **does not** currently recommend use of face shields as a substitute for face masks
- Plastic face shields are likely not effective in preventing the spread of COVID-19 as cloth face masks.
- As COVID-19 cases surge in the US, doctors continue to urge the public to wear masks, observe social distancing and wash their hands.

Face Covering Exemption

According to the chief medical officer for the American Lung Association, “it is very rare for someone to need an exemption.” Other medical experts say there is very few medical reasons for people to skip masks.

Inappropriate medical exemptions may inadvertently hasten viral spread and expose more people to COVID-19 infection.

PCPS will require a written note from a healthcare provider for any student or staff who are not able to wear a face covering while on school grounds due to a medical waiver.

Any student who refuses to wear a face covering while on school grounds will be given 2 warnings and if the student continues to refuse to wear a face covering they may be sent home and placed on virtual learning for one semester.

Resources:

https://www.medscape.com/viewarticle/935720?nlid=136844_4622&src=WNL_mdplsnews_200814_mscpedit_nurs&uac=91697ER&spon=24&impID=2506806&faf=1
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html>

PCPS currently is following the above face covering protocol and will continue with wearing masks in our school building until more students become eligible to receive the COVID vaccine.

- Modifying facilities to allow for physical distancing (e.g., use of cohorts/podding)
- All common areas were closed at the beginning of school. As guidelines have changed we have partially reopened some of our common areas.
- All extra furniture was removed from the classrooms to allow the desks to be spaced out 6 feet.
- Desks in all our classrooms are spaced out 6 feet if possible and at least 3 feet apart.
- Cohorts or pods are used so students remained in the same classrooms with teachers rotating in for art, music classes.
- Students started out eating in their classrooms, outside if weather permitted. Some students are spaced out in the hallways 6 feet apart to each.
- Student meals are packed in boxes with individually packaged food. The boxes are delivered to the classrooms. As some of the state's restrictions have been revised some of our students are eating in the commons area with physical distancing in place. As soon as students finish eating they are required to put their masks back on. No touch trash cans are available for students to dispose of food containers/trash.
- Water fountains have been closed. Students have been allowed to bring water bottles to school and we have water refill stations. We do have some supply of bottled water for any students without a water bottle.
- No classroom parties and or celebrations have been allowed. No potluck meals, celebrations, or staff gatherings have been allowed.
- Sneeze guards/barriers have been installed in our school offices.
- All non-essential visitors, volunteers, external community groups have not been allowed into our buildings.
- We have marked all our hallways, classrooms, offices and other areas to remind students and staff to maintain 6 feet distance.
- Masks are worn at all times in our school building by students and staff.
- All staff meetings have been done virtually.
- We have staggered student arrivals, drop-off, and dismissal times to help meet physical distancing.

Pulaski County Public Schools Protocol for Social Distancing

Social distancing, also called “physical distancing” means keeping a safe space between yourself and other people. The goal of social distancing has two components to it

- Keeping individuals, a safe distance from one another (6 feet)
- And reducing the number of people whom any individual interacts with to lower the risk of spreading COVID-19.

Why practice social distancing?

- COVID-19 spreads mainly among people who are in close contact for a prolonged period of time. Spread happens when an infected person coughs, sneezes, talks, or sings, and droplets from their mouth or nose are launched into the air and land in the mouths, eyes, or noses of people nearby.
- Some people without any symptoms of COVID-19 may be able to spread the virus.
- Keeping distance from others is especially important for people who are at higher risk of getting very sick.

Social distancing should be practiced in combination with other everyday preventive actions to reduce the spread of COVID-19, including wearing a face covering, avoiding touching your face with unwashed hands, and frequently washing your hands with soap and water for at least 20 seconds.

Some of the strategies for physical distancing in our schools include:

- Modified classroom layouts and spacing desks at least 3 feet apart and 6 feet apart when feasible
- Cohort classes to minimize crossover among children and adults.
- Limit unnecessary visitors into the building
- Utilizing outdoors spaces when possible

- Limiting the number of students on buses and mandatory face coverings
- Limiting outside playground time to small groups of students
- Meals will be eaten in classrooms or outdoors when possible
- Avoid sharing drinks, food, and utensils
- Avoid sharing electronic devices, toys, books, and other games or learning aids.
- Having physical distancing markers throughout building to remind individuals to stay apart.

References:

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>
<https://www.aappublications.org/news/2020/06/26/schoolreopening062620>
<https://www.healthychildren.org/English/health-issues/conditions/COVID-19/Pages/Return-to-School-During-COVID-19.aspx>
<https://downloads.aap.org/AAP/PDF/COVID-19%20School%20Re-entry%20Interim%20Guidance%20FINAL%20062520.pdf>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html>

PCPS continue to follow physical distancing guidelines and will continue to follow physical distance guidelines. All signage will remain throughout our school buildings.

- **Handwashing and respiratory etiquette**

Pulaski County Public Schools Handwashing and Hand Sanitizer Protocol

Handwashing is the single most effective infection control intervention (CDC). Handwashing mechanically removes pathogens that contaminate the hands. Keeping hands clean helps to avoid getting sick and spreading germs to others. Droplets containing the virus can spread to hands from coughing, sneezing or from surfaces. If a person touches their mouth, nose, or eyes they may become infected. Handwashing removes the virus.

Laboratory data demonstrate 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 properties as COVID-19. Hand sanitizers are not effective when hands are visibly dirty.

Hand hygiene is performed by washing hands with soap and water for at least 20 seconds. Hand sanitizer should be applied to all surfaces of both hands and rub hands until your hands are dry.

Hand sanitizer should be available throughout schools where sinks and other handwashing facilities are not readily available. **** Alcohol-based hand sanitizers should be used under adult supervision with proper child safety precautions and stored out of reach of young children to prevent alcohol poisoning**

Students, staff, and visitors in a school setting need to wash hands or use hand sanitizer frequently which includes:

1. At the start of the day when children enter the classroom and when they leave classroom at end of the day.
2. After blowing your nose, coughing or sneezing.
3. After using the bathroom.
4. Before eating lunch or snacks, and preparing food.
5. Before and after touching your face
6. After contact with animals or pets and playing outdoors.
7. Before and after providing routine care for another person who needs assistance (e.g. taking someone temperature, assistance with feeding and toileting).
8. Before putting on gloves and after removing gloves.
9. After touching frequently touched areas (e.g. doorknobs, handrails, shared computers).
10. Individuals providing health care services should perform hand hygiene before and after contact with each patient, contact of potentially infectious material, and before putting on and after removing PPE, including gloves.

References:

<https://www.cdc.gov/handwashing/index.html>
<https://www.cdc.gov/handwashing/when-how-handwashing.html>
<https://www.cdc.gov/handwashing/why-handwashing.html>
<https://www.cdc.gov/handwashing/show-me-the-science-hand-sanitizer.html>
<https://www.cdc.gov/handwashing/fact-sheets.html>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html>
(updated 7-23-20)
<https://emergency.cdc.gov/han/2020/han00434.asp> (7-5-20)
<https://www.cdc.gov/handwashing/handwashing-family.html>
<https://www.fda.gov/consumers/consumer-updates/safely-using-hand-sanitizer>
<https://www.cdc.gov/handwashing/hand-sanitizer-use.html>

Handwashing Posters and signs are posted outside all our bathroom. Cover the Cough and respiratory etiquette posters are posted in our hallways and classrooms to serve as reminders for all students and staff. Teacher and other staff consistently remind our students to wash their hands.

- **Cleaning and maintaining healthy facilities, including improving ventilation**
 - All school buildings are cleaned throughout the school day and more thorough cleaning is done each night after all staff and students leave the building which includes cleaning all desks, classrooms and frequently touched surfaces. On days when students were not in school, our school buildings had more deep cleaning done.
 - Hand sanitizer is available in all classrooms.
 - Each classroom teacher has been given a spray bottle of EPA approved disinfectant to use in their classrooms daily and it can be refilled as needed.
 - The HVAC system runs continuously in our school buildings.
 - Isolation areas are cleaned after each use and all our school health clinics are wiped down and mopped each day. School nurses have approved disinfectants to use in the school health clinics along with proper PPE.
- **Contact tracing in combination with isolation and quarantine, in collaboration with the State, local, territorial, or Tribal health departments**

Pulaski County Public Schools Isolation Area Protocol for COVID-19

CDC states that staff and children with symptoms of COVID-19 at school must be safely and respectfully isolated from others.

Isolation Area

1. **Each school will have to plan, prepare and provide an isolation room to monitor students/staff that is separate from the nurse's office where routine medical care is provided.**
2. **A non-health staff member will be assigned to monitor and maintain supervision until student is sent home**

Isolation Procedure

1. Any student who has symptoms of COVID -19 will be
 - The following symptoms will be considered as needing isolation:
 - Fever >100.4
 - Chills
 - Nasal congestion
 - Runny nose
 - Shortness of breath
 - Difficulty breathing
 - Diarrhea

- Nausea/vomiting
 - Fatigue
 - Headache
 - Muscle or body aches
 - New loss of taste or smell
 - Signs and symptoms of MIS-C:
 - Rash. Red eyes. Cracked/swollen lips. Red/swollen tongue. Swelling hands/feet. Stomach pain.
2. The use of facemasks for persons with respiratory symptoms and fever over 100.4 is recommended if available and tolerated by the person and developmentally appropriate.
 3. Symptoms prompting a call to **911** include, but are not limited to
 - Shortness of breath or difficulty breathing
 - Persistent pain or pressure in the chest
 - Confusion or change in behavior
 - Altered level of consciousness
 - Circumoral cyanosis or change in coloring to face and/or extremities
 - Inability to wake or stay awake
 4. The student's parent/guardian or emergency contact will be called to come pick up the student. Student should be picked up within 30 minutes or as soon as possible.
 5. Should the isolated student need to use the restroom, the student will use the bathroom closes to the isolation room if a bathroom is not in isolation room. Once this restroom has been used by an isolated student, the room will not be available to any other employee or student until it has been disinfected appropriately. Notification will be posted on the restroom door stating that the restroom is currently closed. The sign will be removed after the restroom has been appropriately disinfected.
 6. The parent/guardian will call in to the school office when they arrive to pick up the student and a staff member will walk the student out to the waiting parent.
 7. Remember that *schools are not expected to screen students or staff to identify cases of COVID-19*. If a school has cases of COVID-19, local health officials will help identify those individuals and will follow up on next steps. https://www.vdh.virginia.gov/content/uploads/sites/182/2020/06/VDH-Schools-and-Contact-Tracing_062620_Final.pdf
 8. Refer all students to their healthcare providers to determine when school re-entry is recommended.
 9. Staff member assigned to supervise the isolation room must wear gloves and face mask. Staff member assigned may supervise the isolation room from outside the door.
 10. The chair/cot used by the ill student will be disinfected once they leave.
 11. If multiple students are in the isolation space at the same time they will maintain a distance of 6 feet or greater from each other and wear face coverings.
 12. At the end of the day the isolation room will be cleaned and disinfected.

References:

<https://www.cdc.gov/quarantine/index.html>
<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-testing.html>
<https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/>
<https://www.ncbi.nlm.nih.gov/books/NBK214341/>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/symptom-screening.html> (revised 7-23-20)

COVID - 19 Isolation and Quarantine Guidelines for Students

Isolation- If a student tests positive for COVID-19 they must stay home and separate themselves from others in the home as much as possible.

When can a student return to school after being sick with COVID-19

It is safe to end home isolation when:

- At least 10 days have passed since your symptoms first appeared
- And**

- You haven't had a fever for at least 24 hours (without the use of medication) and other symptoms of illness are improving.

When can a student that was diagnosed with COVID -19 but never became sick return to school.

It is safe to end home isolation when:

- At least 10 days have passed since the day your test specimen was collected

Quarantine- means separation of people who were in close contact with a person who is positive for COVID-19 from others. Quarantine means to stay home and monitor your health closely in case you become ill.

What is a close contact?

- Means being within 6 feet of a person with COVID-19 for a total of 15 minutes or more over a 24-hour period.
- Having exposure to a person with COVID-19 and being exposed to their respiratory secretions (e.g., coughed or sneezed on; shared a drinking glass or utensils; kissing) while they were contagious. A person with COVID-19 is considered to be contagious starting 2 days before they become sick (or 2 days before specimen collection if they never had symptoms) until they meet the criteria to discontinue isolation.

When can a student return to school after having close contact with a positive person and being told to quarantine?

- Students should stay home and quarantine for 14 days after their last close contact with the person with COVID-19.
- If you are not able to stay home for 14 days and do not have symptoms you may leave home after 10 days without testing.
- After 7 days with a negative PCR test performed after Day 5 (School nurse must have a copy of negative test results)
- If you end quarantine early or test negative during your quarantine period you should still monitor for symptoms and wear a mask, social distance, wash your hands often for the full 14 days.

COVID -19 Updates for Virginia
December 7, 2020

1. **Prioritizing Case Investigation and Contact Tracing in Virginia**

- This means since the number of positive cases of community transmission has increased the local health department must prioritize contact tracing efforts.
- <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/prioritization.html>
- What this means is that the local health department will not be able to notify every person who tests positive for COVID-19 or their close contacts
- The health department priorities will be:
 - People diagnosed with COVID-19 in the past 6 days and their household contacts
 - People living or working in or visiting congregate living facilities (group homes, nursing or retirement homes) or high density workplaces
 - People involved in known clusters or outbreaks
 - People at increased risk of severe illness
- By prioritizing, the health department can target available resources to the investigations most likely to slow the spread of COVID-19

How may this affect PCPS?

1. COVID Hot line and HR will need to provide more guidance to staff on the need to isolate if they are positive for COVID-19 and help them to identify who in their household would be a close contact and need to quarantine because household transmission is common. (household contact is defined as those who live with, provide care for, or visit the person diagnosed with COVID-19)
2. Parents and guardians will need more information about when there is a household contact who is positive and our students are exposed. They need to understand when a student has been exposed they must keep them home and quarantine.
3. Parents and guardians need to know what the new guidance for quarantine is, what our guidelines will be, and when students who have been exposed can return to school safely.

2. Updated Guidance on the Duration of Quarantine

- Guidance documents from VDH and Superintendent, Dr. Lane still refer to the CDC and their recommendation for a 14-day quarantine period as being the safest option.
- However, they have provided options that are acceptable alternatives when ample community testing is available and people choose to end quarantine early.
- Quarantine can end after Day 10 without testing and if no symptoms have developed.
- Quarantine can end after Day 7 if a viral test (e.g. PCR or antigen test) performed on or after Day 5 is negative and if no symptoms have developed. (Diagnostic tests that determine if someone has an active COVID-19 infection fall into two categories: antigen tests, which are mostly used for rapid testing, and molecular and PCR tests which are considered the gold standard for testing.)
- VDH adopted the revised guidelines with an effective date of Monday, December 7, 2020

Why did CDC revise and update Quarantine Guidelines?

- Shorter duration quarantine alternatives aim to reduce the burden of quarantine and increase overall compliance.
- CDC based the guidance on information from household transmission studies and modeling the residual post-quarantine transmission risk. The estimated risk at day 10 with symptom monitoring without testing is 1% with an upper limit of 10%. Estimated risk at day 7 with symptom monitoring with testing is 5%, with an upper limit of 12%>

How may this affect PCPS?

- May allow staff who are determined to have had a close contact with a person diagnosed with COVID-19 to end quarantine and return to work earlier than the 14-day quarantine period
- Less quarantine time will allow our school staff to be available for in person learning.

All of PCPS school nurses have taken and completed training courses in contact tracing. School nurses have been doing contact tracing with collaboration with our local health department and they have kept this information on detailed spreadsheets and will continue to do contact tracing during the next school year.

- Diagnostic and screening testing
 - HR department developed a COVID hotline for all staff members to use to report all symptoms and possible exposure to COVID.
 - Staff could connect with the COVID hotline by email or phone any time including weekends.
 - Staff members who reported symptoms or exposure to COVID were required to be tested and we only accepted the PCR test. They were required to send documentation of test results to the HR department. Once test results were received by HR the employee was instructed on isolation and quarantine requirements and when they could return to work.
 - Information about the available testing sites and phone numbers to make an appointment were given to all staff and they were informed that testing was free of charge.
 - School Nurses in each school managed student testing results and kept a detailed spreadsheet. When parents called into report that their child was having symptoms or had been exposed to COVID the school nurse would ask parent to send test result documentation and would then

- advise the parent on isolation/quarantine guidelines and let parent know the date they could send their child back to school.
 - Virginia Department of Health is in the process of starting a Pilot COVID testing program for schools. At this time, I have applied for a CLIA waiver to do testing in our schools. But are not doing any testing at this time. It is possible we may participate in the Pilot COVID Testing when we start the new school year.
- **Efforts to provide vaccinations to school communities**
 - January 2021 all our school nurses were offered the COVID vaccine.
 - Mid-January 2021 all our school staff were offered and given time off to get the 1st COVID vaccine. Staff were given time off to get the 2nd vaccine when it was due.
 - April 23, 2020 and May 21, 2020 we had a vaccine clinic at our high school students ages 16-18.
 - May 14, 2021 we had a vaccine clinic at our middle school students ages 12 and up. We plan to have a second clinic for ages 12 and up on June 4, 2021.
 - We are planning to offer more vaccine clinics in the fall of 2021 when our students return for the start of the new school year. We will plan to offer vaccine clinic for our younger students when the vaccine has been approved.
 - We are working with our local health department and our local pharmacies to plan and assist with the COVID vaccine clinics.
- **Appropriate accommodations for children with disabilities with respect to health and safety policies**
 - Students who are at a greater risk of severe illness from COVID-19 were given the option for remote learning.
 - Students who are not able to wear face covering were given the option for remote learning
 - School nurses have continued to provide care to in- person learning students with chronic illness and manage the health care needs according to the students individual healthcare plan.
 - School nurses have participated in 504 meetings virtually.
- **Coordination with state and local health officials**

PCPS have collaborated, shared information and reviewed our school health plan with the local health district from the beginning of our planning stages to return to in-person learning to help us protect the health and safety of all our school staff and students. We will continue to work very closely with our local health department and Dr. Noelle Bissell the medical director for New River Health District.

We have coordinated vaccine clinics for our staff and students with our local health district. Our school nurses have coordinated with the Virginia Department of Health to receive updated information and practice guidelines throughout the year with regular scheduled Zoom meetings. VDOE/VDH have provided COVID resources, https://padlet.com/tracy_white/np3rseb1exi73hoe
https://padlet.com/tracy_white/hwgb0zk4ump1sn3a

Section 3: Continuity of Services

Pulaski County Public Schools has taken and will continue to take actions to ensure continuity of services, including but not limited to services to address students' academic needs and students' and staff social, emotional, mental health, and other needs.

Academic

During the 2020/21 school year, student instruction was based on the phase of reopening as defined by the State of Virginia and determined by Pulaski County Public Schools (PCPS). PCPS operated under phase 2 and progressed to phase 3 as the COVID 19 statistics and guidelines changed. Phase II included reduced days of attendance for students and in phase III students attended 5 days per week, with the

secondary students having reduced instructional face-to-face hours. Due to the secondary hours being decreased, an hour of virtual instruction was expected to be completed 4 days per week.

General Guidelines -2020/21

- Elementary Schools- Students will be assigned one teacher for all instruction in reading, math, science, & social studies. All other teachers will act as itinerant and move from classroom to classroom to provide instruction.
- Middle School- Double blocked schedules so that 2 core subjects and an elective are provided on Mondays & Thursdays and the other 2 core subjects and an elective are provided on Tuesdays & Fridays. This will be achieved through the team concept and teachers will rotate into the classroom for core subjects when possible or use staggered transitions while wearing facemasks. Students will travel in staggered intervals and use face masks while transitioning to their elective courses.
- High School- Double blocked schedules so that students take their 1 & 2nd block courses on Mondays and Thursdays while 3rd & 4th block courses will be held on Tuesdays & Fridays. Students may travel in staggered intervals with the use of facemasks.
- The elementary instructional day will be from 8:30-3:00 (Teacher hours are 8:00-3:30). The secondary instructional day will be from 9:15-2:15 (Teacher hours 8:30-4:00) with the expectation that one hour of virtual will take place after school each day. This will allow each bus to make 2 runs and ensure that older students are available to supervise younger siblings before and after school.

Phase II - Student Schedules/Assignment of Teachers

- Pre-K through Grades 3 will receive face-to-face instruction two days per week and remote learning activities on the other three days.
- Special Education (SPED) and English Language Learners (ELL) of all grades may receive up to 4 days per week of face-to-face and at least one day of remote learning activities
- All regular education students in grades 4-12 will participate in remote learning five days per week.
- The instructional day for those attending face-to-face under Phase II will be from 8:30-3:00. (Teacher hours from 8:00-3:30.)

Identification of Instructional Gaps for Phases II & III

- Each building principal will develop a plan and schedule for this year's teachers to collaborate with last year's teachers in order to identify the areas of English & math that were not covered. (Looping at the elementary grades should be considered.)
- Formative assessments will be conducted for all students in the areas of English & math.
- Instructional Coordinators will work with principals and teachers to identify the types and frequency of assessments
- The first 10-15 instructional days will be used by teachers to cover English & math content and concepts that were not covered last year as evidenced by the formative assessments and collaborative conversations between teachers
- The date for beginning new instruction will be at the discretion of each teacher but should be communicated with each building principal
- The school calendar will be adjusted from 990 hours in 160 days to 180 full days to allow for the extra time needed to address the deficits caused by the closure in March 2020•
- Instructional gaps in Social Studies, Science, elective, and CTE courses will be assessed in a similar manner and Principals will work with teachers to ensure that time is scheduled during the school year to cover the material that was missed due to the shutdown in March 2020. This will give the teachers of these subjects the flexibility to begin new instruction on the first day.

New Instruction for Phases II & III

- New instruction for English & math will begin once the classroom teacher is satisfied that a 2/3 majority of students are ready to move forward. (A remediation plan will need to be developed & enacted for students who continue to struggle with concepts that were missed last year.)
- New instruction for all other subjects should begin immediately.
- All students, who are not assigned to the Pulaski County Virtual Academy for full virtual instruction, will be instructed by the teachers listed on their schedules.
- Pacing guides will be evaluated & modified to ensure that the content most compatible with virtual learning is introduced at the beginning of the year.
- All instruction will be delivered with the use of the Virtual Virginia platform to allow for easier transitions to full virtual learning during the likely intermittent shutdowns.
- Wednesdays are the recommended day to schedule virtual assessments.
- Phase II Only Elementary art, music, & P.E. teachers will provide remote instruction using the Virtual Virginia platform for students not permitted to attend under Phase II guidelines.
- Phase II Only- Reading specialists will conduct small group and individualized instruction virtually for students who are not permitted to attend under Phase II guidelines.

Special Education Services for Phases II & III

- Student learning gaps will be determined and addressed as described in the "Identification of Instructional Gaps" section of this plan unless an alternate plan is developed by the student's IEP team.
- Case management services will be provided for all SPED students and case managers will make a minimum of one weekly contact with the family of each student during Phase III to monitor the student's progress through the blended learning model.
- All SPED related time-lines for evaluations, eligibility determination, & educational planning will continue to be met as required.
- Special Education teachers' schedules will be developed in a way that reduces interaction with multiple classrooms of students.

Moving forward into 2021/22 and beyond

- The strategies developed in 2020/21 will continue with modifications as needed.
- The current plan for PCPS is to return all students to face-to-face instruction in August 2021. If COVID cases surge, plans may be adapted based on data. There will be a virtual learning component for students who meet eligibility requirements, if parents choose that option.
- Data will be disaggregated on formative and summative assessments, including but not limited to, STAR reading and math, Houghton Mifflin reading assessments, Fountas and Pinnell assessments, Phonological Awareness Literacy Screening (PALS), Comprehensive Instructional Program (CIP) benchmark tests, Standard of Learning results, Pearson math assessments, grades, pre- and post-tests, and teacher created assessments.
- Evidenced based interventions to be used will include, but are not limited to, small group instruction, individual instruction, before and after school tutoring based on data disaggregation, computer assisted instruction, robust family engagement, extended learning opportunities during the school year, possible change in the school calendar to help decrease the "summer slide," and multi-tiered system of supports.

Technology Plan for Phase II & III

- All students will be issued a Chromebook and assigned to all of their scheduled courses through the Virtual Virginia platform.
- All content teachers will develop their courses in Virtual Virginia or utilize a course program that is already in place. Special Education teachers will assist their co-teachers with adapting curricula for SPED students.
- Principals, classroom teachers, and ITRTs will work to identify students without sufficient internet service in their home to participate in distance learning through Virtual Virginia. The PCPS technology department will work with these families to identify options for increasing internet accessibility.

- All school parking lots will be hotspots available for students to access the internet whenever needed.

Social, Emotional and Mental Health

- A needs assessment form was sent home to be completed by the parents of each student prior to the start of the 2020/2021 school year.
- School Counselors and Administrators reviewed these needs assessments and considered any previous services or interventions that were being utilized by a student to develop progress plans for students identified as needing additional support.
- Prevention Strategies and available resources that are being utilized to address the needs of each identified student.
 - These include, but are not limited to, classroom guidance, small group counseling, individual counseling, SEL curriculum, community resources such as therapeutic day treatment, school based case management, family engagement activities, and parent nights (virtual or in person).
- Frequent communication with families has occurred and will continue to occur through newsletters, surveys, social media, and school websites.
- Teachers are expected to make a monthly individual connection with the parents of each of their students.
- Academic and career plans will continue to be developed and updated through the use of in-person and virtual meetings with school counselors.
- Individualized personal & career counseling will be provided through in-person and virtual counseling sessions.
- New River Valley Community Services Board provided two professional development sessions for Pulaski County Public Schools teachers and staff focusing on self-awareness and self-care techniques.

Custodial

- Mitigation & sanitization materials such as masks, hand sanitizer, sneeze guards, sanitizing cleaner, will be readily available for use at each school.
- All touched surfaces in each classroom will be sanitized daily.
- Deep cleaning and sanitization were performed on Wednesdays during the first half of 2021/21. After that, daily cleaning continued with deep cleanings in areas after positive Covid tests were reported.
- All of these mitigation measures will continue in the 21/22 school year and beyond.

- **Student Health**

PCPS School Health will continue to monitor and be responsive to the evolving needs of all our students, their families, and our staff during this pandemic. Our health plan will be reviewed and revised as needed to align with guidelines from CDC, VDH, VDOE and our local health district and medical director to endure the health and safety for full time in-person learning.

- **Food Service**

The School Nutrition Program (SNP) will operate under the Seamless Summer Option (SSO) for SY 2021/2022. All students will continue to receive breakfast and lunch at no cost. The SNP will adhere to Center for Disease Control (CDC) guidelines pertaining to all types of meal service. All schools currently have different service models. These different models will continue until further guidance is issued and approved by the Centers for Disease Control (CDC) for safe meal service for students and other patrons.

- Serving lines (all food/beverage items are served or handed to students)
- Meals prepared/packaged and delivered to classrooms, pods, and different areas of the school campus.
- All meals that are delivered are unitized and will continue until further guidance is issued.
- Meals will be claimed using clickers/meal claim sheets. (cashless/touchless for students)
- Students and staff are required to wear mask over nose and mouth when waiting in line to be served.
- All servers are required to wear mask over nose and mouth when serving.
- SN employees are required to wear food safe disposal gloves after hands have been washed for 20 seconds, changing as often as needed.
- Currently no shared objects (e.g. utensils, tongs) are being used – salad bars will consist of ready to eat salads until SNP receives guidance for opening self-serve lines or salad bars.
- Schools (2) in district with self-serve lines will not be utilized. SN staff will serve food items or unitize meals for students.

Pulaski County Public Schools will continue to operate under the following USDA waivers:

- Non-Congregate Feeding
- Meal time Flexibility
- Parent/Guardian Pickup of Meals (when applicable)

Section 4: Opportunity for Public Comment

In developing the ARP ESSER Plan, Pulaski County Public Schools sought public input and took such input into account as described below.

- A reopening task force was constituted in the summer of 2020 to formulate a reopening plan including a return to face-to-face instruction for students. The taskforce was comprised of the Superintendent, district leadership, faculty and staff representatives, and parent representatives. While the plan was being developed, Pulaski County Public Schools received input through emails, calls, and taskforce meetings. The reopening plan was presented to the School Board at a public meeting on July 14, 2020. During the meeting, the public was given an opportunity to speak and provide input. Following the July 14 School Board meeting, the Superintendent held a live webinar to speak about the reopening plan and to allow for public comment during and after the presentation. We have continued to receive input from parents and community members and that feedback has been used to clarify and revise the plan as the year progressed.

Section 5: Periodic Review and Revision of Plan

During the period of the ARP ESSER award (until September 2023), Pulaski County Public Schools will periodically review and, as needed, revise its plan for the safe return to in-person instruction and continuity of services. The plan will be reviewed at least every six months, and Pulaski County Public Schools will seek and take into account public input during the review process. Plan revisions will address updated CDC guidance on safely reopening schools, if any are issued.

Section 6: Making the Plan Available to the Public

Pulaski County Public Schools has taken the following steps to make this plan available to the public:

- The plan is posted at www.pcva.us ;
- The plan is available in multiple languages;
- The plan may be orally translated for parents. Contact Ms. Dannah Card, Email: dcard@pcva.us, Voice: (540) 643-0919, to request translation; and
- Upon request, a parent who is an individual with a disability as defined by the ADA may be provided with the plan in an alternative format accessible by contacting Ms. Sarah Polcha, Email: sspolcha@pcva.us, Voice: (540) 994-2546.