











Return to Learn





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The Return to School

On March 13, 2020, Governor Jim Justice announced the closing of all school facilities in West Virginia in response to the threat of the novel Coronavirus of 2019 (COVID-19). While the intent to re-open schools remained a top priority, the Governor realized that this could not be done within reasonable health and safety standards, and remote learning and engagement continued through the end of the 2019-2020 school year.

Though educators and school employees have worked diligently to deliver instruction and critical services while school buildings have been closed, children across our state have experienced loss during the pandemic. There has been a widened divide in academic progress. Certain children were able to access distance learning and continue to grow academically while others had difficulty accessing or engaging with remote instruction. Many children also lost access to emotional support and health services. The impact of these losses has been especially profound for our children who face significant social-emotional and physical trauma at home.

It is imperative that we do everything possible to safely bring our children back into our schools where they have equal access to all of these vital services.

Hardy County, schools, educators, students and families must begin to prepare for our re-entry to our schools. Our teachers and school personnel are key to the safety and well-being of all students in Hardy County, yet we will need to remain vigilant and flexible. If there is a resurgence of the virus, have contingencies in place for county-wide or individual school closures to prevent community spread. However, if we, through our combined and unifying efforts, follow the guidelines of this document, we will be safer, healthier and better prepared to thrive in the midst of this pandemic.

Minimizing Exposure: A Critical Component of Re-entry

School attendance in Hardy County might look different from other counties around the state, however, the need to minimize possible exposure to COVID-19 must be a consistent priority. Scientific evidence supports the curtailing of the spread of COVID-19 through behavior changes or practices. These guidelines serve the sole purpose of preventing or slowing the spread of COVID-19 in order to keep students, educators, professionals, and service personnel safe during the school day.

Face Coverings and Face Mask

According to national and local health experts, face masks and coverings significantly reduce the spread of COVID-19 by preventing people from contracting and transmitting the disease. It is important to note, that all guidance (locally and nationally) strongly recommends the use of face coverings or masks. The science continues to support the same as these items reduce air droplets produced when people speak, sing, yell, cough and sneeze. Hardy County Schools reinforces the importance of face coverings when it is possible and when it does not aggravate existing health conditions. Not all students can use these because of their age or developmental constraints. This is especially important when children are in congregant settings, unable to exercise six feet of social distancing and/or when there are active cases of COVID-19 in the school community.

Hardy County Schools strongly recommends all students should wear a face covering or face mask in the following settings: during bus transportation, while in hallways and communal areas or, anytime social distancing is not possible. Educators, professionals, and service personnel are recommended to wear face coverings or face mask anytime social distancing is not possible.

Social Distancing

Hardy County Schools is committed to the safety of our students, educators, professionals, and service personnel. With social distancing in mind our school system will be utilizing the following:

- > Social distancing floor/seating markings in waiting and reception areas.
- > Six feet spacing markings to remind students and staff to always stay six feet apart in lines and at other times when they may congregate.
- > Markings on the floors of restrooms and locker rooms to indicate proper social distancing.
- > Limiting nonessential visitors and activities involving external groups or organizations.
- Monitoring arrival and dismissal of students to discourage congregating and ensure students report directly to classrooms or designated areas
- Policies and procedures to address appropriate social distancing to accommodate essential parent/guardian meetings, such as IEPs, disciplinary action, etc.

- Minimize opportunities for sustained exposure (15 minutes or more) by ensuring sufficient social distancing with at least six feet between people whenever possible (e.g., adequate space exists in hallways, classrooms are large enough or class sizes are small enough, students and staff utilize large outdoor spaces).
- Provide frequent reminders for students and staff to stay at least six feet apart from one another.
- When feasible, arrange desks or seating so that students are separated from one another by six feet. If it is not possible to arrange seating six feet apart, consider having all students sit facing the same direction (i.e., all sitting on the same side of a table).
- > Designate hallways as one-way, posting directional reminders on the walls and/or floor.
- Designate entrance and exit doors for classrooms and restrooms when feasible, to reduce people meeting face-to-face.
- ➤ Keep students and teachers in small core groups as much as possible during the day, and from day-to-day. Limit mixing between core groups (e.g., during recess, lunch, arrival and dismissal).
- Suspend activities that involve bringing together large groups of people or activities that do not allow for social distancing, including assemblies.
- Whenever possible, conduct events such as field trips, parents/family meetings, assemblies and performances virtually.

Health and Wellness

Monitoring and Handling of Presumptive, Suspected & Confirmed COVID-19 Cases

- Post signage at the main entrance requiring that people who have been symptomatic with fever and/or cough not enter. Signage will be provided by the West Virginia Department of Education.
- Educate staff, students and their families about the signs and symptoms of COVID-19, when they should stay home and when they can return to school.
- Establish and enforce wellness policies to prevent the spread of disease, including:
 - o Require staff to stay home if sick; and
 - Allow flexibility with leave policies as provided by the CARES Act Temporary Rule for Paid Sick Leave and Expanded FMLA.
- > Establish a dedicated space for symptomatic individuals that will not be used for other purposes.
- > Immediately isolate symptomatic individuals to the designated area at the school and send them home to isolate.
- Ensure symptomatic students remain under visual supervision of a staff member who is at least six feet away. The supervising adult should wear an appropriate face covering.
- Require the symptomatic person to wear a cloth face covering or a surgical mask while waiting to leave the facility when age and health appropriate.
- Cloth face coverings should not be placed on:
 - Anyone who has trouble breathing or is unconscious;
 - Anyone who is incapacitated or otherwise unable to remove the face covering without assistance;
 and/or
 - Anyone who cannot tolerate a cloth face covering because of developmental, medical or behavioral needs.
- Conduct symptom screening of any visitors entering the building, including family members, vendors and others. Screening may be provided at the school entrance or at the main office. Individuals waiting to be screened must stand six feet apart from each other. Use tape or other markers on the floor for spacing.
- The staff member responsible for screening temperatures must wear a cloth face covering and must stay six feet apart unless screening temperature.
- Use a touchless thermometer if one is available.
- If not available, use a tympanic (ear), digital axillary (under the arm), or temporal (forehead) thermometer. Use disposable thermometer covers that are changed between individuals.
- ➤ Do not take temperatures orally (under the tongue) because of the risk of spreading COVID-19 from respiratory droplets from the mouth.



- > Staff member must wash hands or use hand sanitizer before touching the thermometer.
- > Staff member must wear gloves if available, change between direct contact with individuals, and must wash hands or use hand sanitizer after removing gloves and between direct contact with individuals.
- > Staff member must clean and sanitize the thermometer using manufacturer's instructions between each use
- ➤ Ensure teachers utilize the age-appropriate Symptom Screening Checklist for students.
 - For teachers of students in grades pre-k-2, the checklist should be used in conjunction with teacher observation & monitoring of student's appearance, activity and level of engagement.
- Require school nurses or delegated school staff who provide direct patient care to wear appropriate protective gear and perform appropriate hand hygiene.
- > Once a symptomatic person is removed from the school, implement cleaning and disinfecting procedure following CDC guidelines.
- > Have a plan for how to transport an ill student or staff member home or to medical care.
- > Adhere to the following process for allowing a student or staff member to return to school:
 - o If a person has had a negative COVID-19 test, they can return to school once there is no fever (without the use of fever reducing medicines) and they have felt well for 24 hours.
 - If a person is diagnosed with COVID-19 by a medical professional based on a test or symptoms or does not seek medical attention and has symptoms, he or she should not be at school and should stay at home until he or she (or a family member if younger child) can answer YES to the following questions:
 - Has it been at least 10 days since the individual first had symptoms?
 - Has it been at least three days since the individual had a fever (without using fever reducing medicine)?
 - Has it been at least three days since the individual's symptoms have improved, including cough and shortness of breath?
- Notify local health authorities of confirmed COVID-19 cases among children and staff.
- Ensure that if a person with COVID-19 was in the school setting while infectious, school administrators coordinate with local health officials to notify staff and families immediately while maintaining confidentiality in accordance with FERPA and all other state and federal laws.

Protecting Vulnerable Populations

- Systematically review all current health plans for accommodating students with special healthcare needs and update their care plans as needed to decrease their risk of exposure to COVID-19.
- > Create a self-referral process for students/families at high risk for COVID-19 and have a plan in place to address requests for remote learning (e.g., Virtual School, homebound).
- ➤ Obtain complete health histories and current well-child checks for all students entering pre-k, kindergarten, grade 2, grade 7 and grade 12. Be alert for any conditions or chronic illnesses that may exacerbate symptoms of COVID 19.
- Consider ways to accommodate the needs of children who are medically fragile, have underlying medical conditions and/or are prone to illnesses.
- Ensure health records and emergency contacts for students and staff are updated
- > Implement a remote learning option for students who have been identified by their physician as unable to be in a traditional classroom setting because of high-risk status for severe illness.

Social-Emotional Wellness

Fear and anxiety about COVID-19 can be overwhelming. The precautions that continue to be in place to slow the spread of the virus and the uncertainties these precautions may create can give rise to unexpected emotions in both children and adults.

- > Ensure all policies and procedures are culturally sensitive and ensure equality and access for all.
- Convene a crisis response planning team meeting to update and revise the <u>West Virginia Schools Crisis</u>

 <u>Prevention and Response Plan</u> through collaborative planning. (Refer to <u>Crisis Response Plan Template</u>

 Overview/Instructions for more information.)
- In response to a crisis, convene a mental health crisis response team meeting to provide mental health supports.
- Provide access to professional student support staff, including school counselors, school psychologists and school nurses.
- Implement a continuous advisory system that provides students with meaningful supportive relationships and maximizes each student's personalized learning experience.
- Provide an integrated delivery of social-emotional standards
- > Develop a plan/protocol to ensure students feel safe, welcome and connected to at least one caring adult in the school.
- Establish a school mental health resource team focused on the physical, social-emotional and mental health wellness of students, staff and families. School counselors, school psychologists, school nurses and social workers are trained to provide social-emotional and mental health supports to students.
- > Establish partnerships with community agencies to provide additional mental health services, as needed.
- Clearly communicate re-entry plans with students, families and school staff. Identify and address concerns related to re-entry.

Cleaning & Hygiene

- Provide adequate supplies to support healthy hygiene behaviors (e.g., paper towels, tissues, soap and hand sanitizer with at least 60% alcohol) for safe use by staff and older children. Provide hand sanitizer with at least 60% alcohol for safe use by staff and older children at entrances, exits, classrooms and the cafeteria.
- > Teach and reinforce handwashing with soap and water for at least 20 seconds and/or the safe use of hand sanitizer with at least 60% alcohol by staff and older children.
- Increase monitoring to ensure adherence to safety measures among students and staff.
 - Supervise use of hand sanitizer by students.
 - o Ensure children with skin reactions to hand sanitizer use soap and water.
 - Reinforce handwashing during key times such as, before, during and after preparing food; before eating food; after using the toilet; after blowing nose, coughing, or sneezing; after using bare hands to touch objects that have been handled by other individuals.
- Require hand cleaning when entering each classroom.
- > Systematically and frequently check and refill hand sanitizers.
- > Encourage staff and students to cough and sneeze into their elbows, or to cover with a tissue.
- Ensure that used tissues are thrown in the trash and hands are washed immediately with soap and water for at least 20 seconds or cleaned with hand sanitizer.
- Ensure that proper cleaning and disinfection of high-touch surfaces occurs frequently throughout the day.
- Establish a schedule for and perform ongoing and routine environmental cleaning and disinfection of high-touch areas (e.g., door handles, stair rails, faucet handles, toilet handles, playground equipment, light switches, desks, tables, chairs, kitchen countertops, cafeteria and service tables, carts, and trays) with an EPA Approved Disinfectant for SARS-CoV-2 (the virus that causes COVID-19), and increase frequency of disinfection during high-density times.
- Disinfect all shared objects (e.g., gym or physical education equipment, art supplies, toys, games) between uses.
- Paper-based materials, such as books and loose-leaf paper, are not considered high-risk for COVID-19 transmission and do not require additional cleaning or disinfecting procedures.
- Ensure safe and correct use and storage of cleaning and disinfection products, including securely storing and using products away from children, and allowing adequate ventilation when staff use such products.
- > Develop processes to keep students' personal items separate and limit shared spaces (i.e., lockers).
- ➤ Limit sharing of personal items and classroom materials to small groups and disinfect between uses or provide adequate supplies for individual student use.
- Avoid shared use of soft or other items that cannot be easily cleaned and disinfected (e.g., stuffed toys, clay).

- Provide additional options for handwashing stations by maximizing the number of available sinks (e.g., classroom sinks, all restrooms, portable handwashing stations).
- > Water bottle filling stations are preferred and the use of water fountains should be limited.

When a student or staff member is a suspect or positive case of COVID-19

As long as routine cleaning and disinfection has been done regularly, additional cleaning and disinfection may not be necessary. Depending on when a person with COVID-19 was last in the facility, it may be difficult to know what areas they were in and what objects or surfaces they may have touched after they became sick

General precautions for the custodial staff after an ill student has been in your facility

The risk of getting COVID-19 from cleaning is low. The following are general precautions for custodial staff, when a known case of COVID-19 has occurred:

- Staff should not touch their face while cleaning and must wash hands after cleaning.
- Custodial staff should wear disposable gloves when cleaning and handling trash.
- Custodial staff should thoroughly wash hands with soap and water for at least 20 seconds after gloves are removed.
- Staff who are responsible for cleaning and disinfecting should be trained to use disinfectants safely and effectively and to safely clean up potentially infectious materials and body fluids blood, vomit, feces, and urine

Water & Ventilation Systems

When reopening a building after it has been closed for a long period of time, reduced use of water and ventilation systems can pose health hazards. There is an increased risk for Legionella and other bacteria to form in stagnant or standing water.

- Implement guidelines found in the CDC's Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation and take steps to ensure that all water systems and features (e.g., sink faucets, drinking fountains) are safe to use after a prolonged facility shutdown to minimize the risk of diseases associated with water & ventilation systems.
- > Inspect ventilation systems for proper operation and maximum circulation of outdoor air.



School Food Service

The following protocols are established for school food service consistent with statewide guidance for safely opening restaurants issued under the current State of Emergency declaration on June 2, 2020, by the West Virginia Department of Health and Human Resources, Bureau for Public Health.

- > Establish lunch schedules and procedures that maintain cafeteria capacity at a 50% maximum threshold including:
 - Spaced meal serving lines (marked on floors);
 - Spaced seating; and
 - o Longer meal periods for more staggered meal delivery.
- Coordinate food service operations with teachers and administrators.
- ➤ Ensure that all food service employees wear cloth or disposable face coverings at all times, to the greatest extent possible. Such coverings shall be cleaned or replaced daily. Reasonable accommodations will be made for employees who cannot wear a mask because of a specialized health condition; medical support documentation may be required by the employer to better understand what accommodation is appropriate. Local health departments can also be resources in exploring acceptable solutions.
- Thoroughly detail, clean and sanitize the entire cafeteria facility before resuming dine-in services and continue to do so regularly. Focus such cleaning and sanitation on high-contact areas that would be touched by employees and students by always doing the following:
 - Procure and utilize cleaning products and protocols that include EPA-approved disinfectants that meet CDC requirements for use and effectiveness against viruses, bacteria and other airborne and blood-borne pathogens. For more information, please refer to the CDC guidelines on disinfecting buildings and facilities.
 - Between school meal services, clean and sanitize commonly touched areas such as tables and seats
 - o Implement procedures to increase the frequency for cleaning and sanitizing surfaces in the kitchen. Avoid all food contact surfaces when using disinfectants.
- Discard any single-use items left in the meal service area by students.
- > Ensure food preparation and distribution models are in place that adhere to social distancing guidelines.
- Place designated trash bins where students can dispose of items at the end of the meal service in a manner that adheres to proper social distancing guidelines.
- > Serve milk and water to students in individual bottles. If students will be reaching into a cooler to grab their own milk or water, the cooler must be cleaned and sanitized between dining groups. Beverage dispensers with buttons or leavers (such as a water cooler) should be cleaned at the same frequency.
- Eliminate self-service food stations for food, condiments and utensils.
- Eliminate family-style meal service (i.e., in pre-k collaborative settings within the school system). Meals will be distributed to students by a school employee following proper food safety guidelines.
- Eliminate share tables until the State of Emergency is lifted related to the COVID-19 pandemic or otherwise directed by the Governor's Office.



- > Ensure that all students and staff wash their hands before and after the meal service.
- > Ensure that USDA Civil Rights requirements (i.e., special diets, protected classes) are followed.
- Develop meal service contingency plans for remote learning scenarios.
- Audit necessary supplies to ensure that schools are prepared to operate alternative serving models (i.e., serving meals in the classroom, disposable food service items).
- Establish procedures and protocols to ensure students have access to school meals during unanticipated school closures. Counties should include, at a minimum, the following topics:
 - o Procurement of food
 - o Food distribution options
 - Staffing and volunteers
 - Transportation

Bus Transportation

- Clean and disinfect frequently touched surfaces in the vehicle (e.g., surfaces in the driver's cockpit, hard seats, arm rests, door handles, seat belt buckles, light and air controls, doors and windows, and grab handles) before all routes.
- Fully clean and disinfect transportation vehicles regularly and/or as needed. Children must not be present when a vehicle is being cleaned.
- > Develop procedures for the proper disposal and/or laundering of cleaning supplies after use.
- Keep doors and windows open when cleaning the vehicle and between trips to let the vehicles thoroughly air out.
- Clean, sanitize and disinfect equipment including items such as car seats, wheelchairs, walkers and adaptive equipment being transported to schools.
- Ensure safe and correct use and storage of cleaning and disinfectant products, including storing products securely away from children and providing adequate ventilation when staff use such products.
- Provide hand sanitizer (with at least 60% alcohol) to support healthy hygiene behaviors on all school transportation vehicles for safe use by staff and older children.
 - Hand sanitizer should only remain in school vehicles while they are in use as heat and direct sunlight can degrade its effectiveness.
 - o Systematically and frequently check and refill hand sanitizers.
- Require teachers and students to view <u>"Safe Bus Loading &Unloading Procedures"</u> video to address best practices related to transportation safety.
- > Develop seating arrangements and protocols to limit the number of students to no more than two per seat. Face masks or coverings are recommended. The school county may provide face masks for students if they do not have one.
- When feasible utilize seating arrangements that require siblings and/or any students who cohabitate to sit together. Students living in the same household may be permitted to sit three to a seat, when possible. Keep bus stop groups of students together in the same section of the bus. WVBE Policy 2525 stipulations for pre-k students still apply.
- Design appropriate bus loading and unloading procedures and/or seating charts to minimize contact between students.
- ➤ If appropriate and safe, consider keeping windows open while the vehicle is in motion to help reduce spread of the virus by increasing air circulation.
- Create a contingency plan for the transportation of students who may experience any COVID-19 symptoms during the course of the school day.
- When feasible, utilize procedures for loading and unloading buses to limit the number of students is entering/ exiting the building at one time.



Communications

It is important that education staff, families, students and communities receive information from reputable and reliable sources. Credible information is available at wvde.us/COVID19, coronavirus.wv.gov and cdc.gov.

- Develop reliable communication channels that accommodate all families regardless of technology accessibility. This should include online communications, emails, robocalls, personal phone calls, texts, and newsletters (electronic and paper).
- Survey families to learn how to best communicate with them.
- Provide an email or phone number that is monitored regularly that families and community members may use to submit questions.
- > Provide timely updates to the community for the upcoming school year including when school begins, what the school day will look like, what safety precautions are in place, additional requirements of students and important screening protocols.
- > Be transparent and timely in updating families and communities.
- Use age-appropriate assets such as videos, posters, flyers, social media posts, email graphics, newsletters and other resources to educate students about COVID-19 best practices and information.

Resources

Resources for Protecting Vulnerable Populations:

- Centers for Disease Control and Prevention https://www.cdc.gov/
- > COVID-19 School Re-entry Recommendations & Guidelines, West Virginia Association of School Nurses
- National Association of School Nurses Coronavirus Disease 2019 Resources https://www.nasn.org/nasn/nasn-resources/practice-topics/covid19
- ➤ West Virginia Department of Health & Human Resources (COVID-19) https://dhhr.wv.gov/COVID-19/Pages/default.aspx

Resources for Social-Emotional Wellness

- > Collaborating for Student Success: <u>Understanding the Roles of Student Support Personnel (WVDE)</u>
- Social-emotional Learning for Parents (CASEL video) https://www.youtube.com/watch?v=y2d0da6BZWA&t=289s
- West Virginia Department of Education: ReClaimWV https://wvde.us/reclaimwv/
- West Virginia Positive Behavioral Interventions and Supports http://wvpbis.org/
- West Virginia Behavior and Mental Health Technical Assistance Center https://www.marshall.edu/bmhtac/request-for-assistance/
- West Virginia Safe Schools Toolkit https://wvde.us/leadership-system-support/safe-supportive-schools/safe-schools-toolkit/
- West Virginia Handle With Care http://handlewithcarewv.org/

Resources for School Food Service

- West Virginia Food Code Permit holders are required to follow directives of the regulatory authority in response to public health emergencies. 8-304.11 https://www.wvdhhr.org/phs/food/index.asp
- West Virginia Code 21-3A-1A (Article 3: Safety and Welfare of Employees) http://www.wvlegislature.gov/wvcode/code.cfm?chap=21&art=3

Resources for General Public Health and Safety Protocols

- The American Academy of Pediatrics 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/
- ➤ The Journal of the American Medical Association https://jamanetwork.com/journals/jama/fullarticle/2766822

