

River Bend CUSD #2

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

Aug 6, 2021 **DRAFT**

Introduction

Sweeping through the world in early 2020, the COVID-19 pandemic resulted in major upheaval to all aspects of life, including unprecedented school closures in the spring and fall of 2020. To open schools for in-person instruction required strict health and safety protocols which created barriers and limitations to teaching and learning. Recognizing that students across remote and in-person settings faced significant academic, social, emotional, and mental health challenges as a result of the interrupted education and the trauma caused by the COVID-19 pandemic, the U.S. Congress made emergency funds available to local school districts to prevent, prepare for, and respond to COVID-19. Most recently, funds available through the American Rescue Plan (ARP) Act require that school districts develop a *Plan for Safe Return to In-Person Instruction and Continuity of Services*. As such, this plan has been developed in accordance with the ARP Act and the Illinois State Superintendent of Education declaration of July 9, 2021; is aligned with guidance provided by the Illinois Department of Public Health (IDPH) and the Centers for Disease Control and Prevention (CDC); and addresses adjustments needed in response to evolving COVID-19 pandemic circumstances. Taking the public's input into account, this plan was also developed through consultation with students, parents, school and district administrators (including special education administrators), teachers, school staff, food service staff, transportation service staff, labor association leaders, and county health department officials. Opportunity for the public to provide input was provided from July 12-15 through a web-based comment platform. Upon request, this plan will be provided in an alternative format accessible to parents who are individuals with a disability as defined by the ADA. This plan will also be made publicly available on the district's website. School strategies in this plan may be removed based upon local conditions, levels of community transmission (i.e., low, moderate, substantial, or high), local vaccine coverage, use of screening testing to detect cases in K-12 schools, and consultation with local public health officials to determine the prevention strategies needed. School officials will communicate any changes in plans to staff members, students, and parents through the district's regular communication platforms. **The River Bend Board of Education has given the Superintendent of Schools the ability to modify this plan to address changes that occur based on local transmission rates and state directives.**

Maintaining the Health and Safety of Students, Educators, and Other Staff

In accordance with the Illinois State Superintendent of Schools July 9, 2021 declaration, all River Bend Schools will be open fully for in-person learning for all student attendance days for the 2021-22 school year. Remote instruction will only be made available for quarantined students with exceptions as created through the Illinois Department of Public Health and the Illinois State Board of Education.

You will note that throughout the plan we attempt to accomplish the following:

- Adhere to the guidelines provided to limit the risk of exposure for students and staff
- Adhere to the guidelines provided to limit the risk of liability and financial loss as a result of not following standards established by state guidance
- WHILE DOING THE ABOVE, attempt to move closer and closer to something that more closely resembles what we remember as 'normal school.'

MOST RECENT GUIDANCE

Absent an order, clarification, or decree from the Illinois State Board of Education and/or the Illinois Governor's Office, River Bend schools will be in operation in accordance with the CDC's updated (August 2, 2021) *Guidance for COVID-19 Prevention in Kindergarten (K)-12 Schools*, also adopted by the IDPH on August 2, 2021. These guidelines include the following:

1. Mask Use

Gov. Pritzker's Executive Order dated August 4, 2021 required all P-12 schools to require masking regardless of vaccination status. When the mask requirement executive order changes, River Bend will once again follow the CDC guidance.

At this time, IHSA will be conducting a full sports season for the fall. In accordance with the governor's order, all indoor activities require masks. This requires all participants, coaches, and spectators to wear masks indoors. Outdoor mask use is recommended at this time. Depending on the direction we receive from the IHSA, we may have pivots in our health plan for the high school. Protocols for our middle school sports programs will be directed primarily by a combination of IHSA/IESA guidelines and guidelines agreed to by our athletic conference.

Once masking becomes recommended, mask use will be recommended indoors for students, staff and visitors that are unvaccinated. Mask use is recommended outdoors during activities (e.g., participating in outdoor play, recess, physical education, sports, extra curriculars) that involve sustained close contact with other people who are not fully vaccinated, particularly in areas of substantial to high transmission.

School staff are to model support for and encourage students and fellow staff members to be supportive of people who continue to wear a mask as a personal choice or because of a personal medical reason.

Once Governor Pritzker's executive order is lifted, or masking goes back to being recommended, there may come a time when masking is required based on our local data. The numbers in the table below are the percentages we used last year when considering whether or not to shut down school. These are the same numbers we may use when deciding whether or not masks are to be required once the Governor's executive order is lifted.

Unless exempt in a manner meeting CDC, IDPH, and ISBE guidelines, passengers and drivers must wear a mask on school buses.

Category	Low	Medium	High
Percent of positive COVID-19 students	5% or less	5% - 7.99%	8% and above
Masking	Recommended	Required for all	Required for all
Other Preventative Strategies	Social Distancing COVID-19 Testing Vaccinations	Social Distancing COVID-19 Testing Vaccinations	Social Distancing COVID-19 Testing Vaccinations

2. Physical Distancing

To the extent possible within school and classroom structures so that it does not exclude students from full day in-person learning, school staff are to help students commit to physical distancing as much as possible by:

- arranging furniture, play spaces and naptime materials to model and reinforce physical distancing of at least 3 feet;
- providing assigned seating for students and encourage students to remain in these seats to the greatest extent possible; and
- developing marked paths of travel in classrooms and corridors.
- increased distance and mitigation should be considered for unvaccinated individuals.

School staff will maximize physical distance as much as possible when moving through food service lines and while eating indoors. Aside from the cafeteria, additional spaces for mealtime seating will be utilized when available and feasible (e.g., weather permitting). Students and staff who are fully vaccinated do not need to distance while eating.

Physical distancing measures are to be done in an equitable manner that does not perpetuate academic, racial, or other tracking (e.g., separating people into fully vaccinated and non-fully vaccinated cohorts).

3. Handwashing and Respiratory Etiquette

School staff will monitor and reinforce frequent handwashing and respiratory etiquette by

- continuing to teach handwashing with soap and water for at least 20 seconds;
- assisting young children with handwashing;
- reminding everyone in the facility to wash hands frequently;
- using hand sanitizer containing at least 60% alcohol (for teachers, staff, and older students who can safely use hand sanitizer) when handwashing is not possible;
- continuing to teach respiratory etiquette (e.g., covering coughs and sneezes); and
- providing adequate handwashing and hand sanitizer supplies that are safely stored (up, away, and out of sight of young children and used only with adult supervision for children under 6 years of age).

4. Facility and Transportation Cleaning, Disinfection and Ventilation

School custodial staff and transportation staff will continue to clean surfaces daily. To further reduce the risk of spreading infection, these staff will also use disinfectants on the U.S. Environmental Protection Agency COVID-19 “List N” to disinfect spaces occupied by someone who tested positive for COVID-19 within the last 24 hours.

Maintenance staff will continue to regularly replace school ventilation system filters by using high-efficiency particulate air (HEPA) filters. Although regular tests indicate a high quality of indoor air in our schools, continued improvement of ventilation systems are always being considered.

When possible, staff will open doors and windows, use child-safe fans, and have activities, classes, or lunches outdoors when circumstances allow.

When it does not pose a safety risk, transportation staff will keep vehicle windows open at least a few inches to improve air circulation.

5. Contact Tracing in Combination with Isolation and Quarantine

Students and staff who have symptoms of infectious illness, such as influenza (flu) or COVID-19, should stay home, notify the school, and contact their healthcare provider for testing and care.

Individuals in our school environments who show symptoms of COVID-19 are to immediately report to or be escorted to the school's health care professional's office to be either sent home or be quarantined in the school's supervised safe area while awaiting pickup/evaluation.

Students and staff are required to wear masks while in the safe area. Parents should ensure that ill students are picked up from school within 30 minutes (or as soon as possible) after being notified. Ill students will not be allowed to utilize the school bus to return home. To facilitate COVID-19 diagnosis and inform the need for quarantine of close contacts and isolation, a rapid COVID-19 test can be administered on site only with parental consent.

For teachers, staff and adults in the indoor K-12 classroom setting, CDC defines a close contact as an individual not fully vaccinated against COVID-19 who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period. According to the new CDC close contact definition, classroom students who were within 3 to 6 feet of the infected student are not treated as close contacts as long as both the infected student and exposed student were engaged in consistent and correct use of a well-fitting mask and other K-12 school prevention strategies (such as universal and correct mask use, physical distancing, increased ventilation) were in place in the K12 setting. In other words, only classroom contacts within 3 feet require quarantine as long as both the case and the contact were consistently masked. If they were not consistently masked, then close contacts are classroom students who were within 6 feet of the infected student for a cumulative total of 15 minutes or more over a 24-hour period.

Students and staff who are not fully vaccinated should quarantine after a recent exposure to someone with COVID-19. Exposure is defined as 15 minutes of contact within a 24 hour period within a 6 foot radius of the person testing positive for COVID-19.

Fully vaccinated people who were in close contact with someone who has COVID-19 but do NOT have COVID-19 symptoms do not need to quarantine or be tested.

Student absences related to a COVID-19 isolation or quarantine will be recorded as excused. To ensure continuity of services, school work missed during such an absence can be requested and made up in accordance with the school's policy (refer to student handbook); social, emotional, mental health, or other needs will be provided in accordance with a student's IEP or 504 Plan. Parents of students who have social, emotional, mental health, or other needs outside of an IEP or 504 Plan should contact their child's principal to discuss needs. Remote instruction will only be made available for non-vaccinated or vaccine ineligible students who are under quarantine as directed by the local health department or the Illinois Department of Public Health.

Students who are quarantined as a result of COVID-19 will receive access to appropriate remote learning services.

Staff absences related to a COVID-19 isolation or quarantine will be recorded in accordance with the district's sick leave policy and related professional negotiations agreements. To ensure continuity of services, staff members should contact their principals to discuss support for social, emotional, mental health, or other needs.

To the extent allowable by privacy laws and other applicable laws, school health care professionals will continue to collaborate with Whiteside County Health Department officials to confidentially provide information about people diagnosed with or exposed to COVID-19, including making notifications to staff and parents as

soon as possible regarding those who were in close contact of someone in the school who tested positive for COVID-19.

The school's health care professional will inform the school community of outbreaks while maintaining student and staff confidentiality rights.

Students and staff suspected of having COVID-19, whether they were tested or not, are to follow the CDC guidelines to determine when they can return to school.

Following quarantine, students and staff returning from illness related to COVID-19 are to call to check in with the school's health care professional.

QUARANTINE LENGTHS

The CDC currently recommends a quarantine period of 14 days. Further, local public health authorities determine and establish quarantine options for their jurisdictions and may decide to continue using a 14-day period and/or shortened options for certain lower risk close contacts. Given that having students in school is our top priority, we will choose to shorten quarantine time periods whenever possible. The following options to shorten quarantine are acceptable alternatives:

- Option 1: Quarantine the full 14 days. Quarantine will end as long as no symptoms develop
- Option 2: Quarantine can end **after** Day 10 without testing and if no symptoms have developed during any day of the daily monitoring period.
 - With this strategy, residual post-quarantine transmission risk is estimated to be about 1% with an upper limit of about 10%.
- Option 3: Quarantine can end **after** Day 7 if a RT (Reverse Transcriptase)-PCR test (non-rapid test) is negative and if no symptoms develop during any day of the daily monitoring period.
 - The earliest a close contact can be tested would be on Day 6 with quarantine being discontinued no earlier than Day 8.
 - With this strategy, the residual post-quarantine transmission risk is estimated to be about 5% with an upper limit of about 12%. This option is not recommended for children in daycares or K-12 schools.
- Option 4: If masks are required for all, then a test-to stay option can be used. Individuals that are considered close contacts can be rapid tested on days 1, 3, 5, and 7. As long as tests are negative, students are allowed to stay in school and participate in extracurricular activities.

Due to the risk of severe illness and congregate transmission, IDPH recommends the full 14-day quarantine period rather than the shortened options described above.

6. Screening Testing

When community transmission is at moderate, substantial, or high levels, parents can request COVID-19 screening testing for their students who have not been fully vaccinated by contacting the school's health care professional.

Additionally, the district may consider mass screening in order to prevent infection spread should the current local data dictate such actions.

At any level of community transmission, any staff member who has not been fully vaccinated can request COVID-19 screening testing by contacting the school's health care professional.

7. Promoting Vaccination

Working with the Whiteside County Health Department a COVID-19 vaccine clinic, available to anyone in our area 12 years of age and older, was held during the 2020-2021 school-year. River Bend has also promoted vaccination opportunities via all-district email and via various social media channels.

Respectful of peoples' varying levels of vaccine confidence, those who want to get vaccinated against COVID-19 can visit [vaccines.gov](https://www.vaccines.gov) to find out where they can get vaccinated in our community. In addition, River Bend Health Services staff will work to help coordinate vaccine information for anyone in need of support.

8. Disabilities or Other Health Care Needs

Parents of students who need accommodations, modifications, or assistance related to COVID-19 safety protocols, disabilities, underlying medical conditions, or weakened immune systems should contact their student's case manager or building principal to discuss the need(s).

Staff members who need accommodations, modifications, or assistance related to COVID-19 safety protocols, disabilities, underlying medical conditions, weakened immune systems, or a sincerely held religious belief or practice (covered by Title VII of the Civil Rights Act of 1964) should contact their school's principal to discuss the need(s). Staff members with weakened immune systems are advised to contact their healthcare professional about the need for continued personal protective measures after vaccination.

9. Visitors

Nonessential visitors, volunteers, and activities involving external groups or organizations with people who are not fully vaccinated are discouraged from visiting schools when students are present. If not fully vaccinated volunteers and or visitors are present, additional mitigation strategies such as masking and distancing may be implemented.

10. Collaboration with Public Health Officials

District officials will continue to collaborate and consult with Whiteside County Health Department officials throughout a pandemic on various logistics and decision-making including, but not limited to, school health and safety protocols, screening testing, contact tracing, vaccine clinics, and emergency school closings.

11. Plan Review

Through September 30, 2023, this plan will be reviewed no less frequently than every six months, or where following significant revision in guidance from IDHP/CDC and revised as appropriate.. Revisions will address the most recently updated safety recommendations by the CDC, and if needed provided in an alternative format accessible to parents who are individuals with a disability as defined by the ADA, and made publicly available on the district's website.