

Weld County School District Re-3J

BELIEVE, ACHIEVE, SUCCEED

Our Mission:

Creating opportunities for student success through a safe learning environment, engaging instruction, diverse activities, and a supportive community.



Introduction

This plan outlines Weld County School District Re-3J's strategy in preparing for, responding to, and recovering from a highly infectious disease outbreak such as Pandemic flu and COVID-19 in a collective, community approach.

This document provides supplemental information from the Colorado Department of Public Health and Environment (CDPHE), The Center for Disease Control (CDC), Weld and Adams County Department of Public Health and Environment, and the Colorado Department of Education (CDE).

Purpose

The purpose of this highly infectious disease preparedness plan is to increase the communication to our Re-3J staff, families, students, and community in the event of an outbreak. The plan serves as a resource guide for planning and responding to a sudden pandemic within our organization. In some cases, highly infectious illnesses may have a short incubation period, spread easily, and cause severe illness or possible death, and may have no possible existing vaccine or treatment. Furthermore, the purpose of this plan is to achieve the following goals:

- Maximize the health and wellness of all, while minimizing educational and social disruption
- Enable Weld Re-3J to continue to operate and provide services as normally and effectively as possible in the event of a highly infectious disease outbreak with minimal academic interruption and losses.
- Foster coordination with federal, state, and local agencies. Weld Re-3J response will be guided by the Colorado Department of Public Health and Environment (CDPHE) and Weld and Adams County Department of Health and Environment in the event of increased staff/student absences due to a highly infectious outbreak.
- Establish and maintain effective, timely, and sensitive decision making and communication regarding the continuity of student learning as the core value and focal point.
- Develop a communications plan to ensure that students, parents, staff, and community receive timely and accurate information regarding disease prevention strategies and infection control strategies. This includes multiple platforms of communication (online, newsletter, email, paper copies as requested) and translated versions of the plan as appropriate.
- Coordinate the use of Weld Re-3J facilities as vaccination sites, temporary clinics/health areas, or other needs when appropriate.

• Prepare and provide for mental health/crisis service needs of staff, students, families, and the community.



Highly Infectious Diseases

The scope of this preparedness plan covers the most prevalent highly infectious illnesses such as Pandemic flu, other airborne respiratory illnesses – COVID-19 (coronavirus), MERS and SARS, Ebola, airborne viruses such as Anthrax, and all other unknown diseases. **Pandemic flu will be the most concentrated.**

Anthrax – is a serious infectious disease that can cause death. Anthrax gets into the body through the skin, lungs, or gastrointestinal tract. All types of anthrax are bacterial and can spread throughout the body quickly if not treated with antibiotics. The type of illness a person develops depends on how anthrax enters the body.

- **Cutaneous** anthrax is the most common and least dangerous type of anthrax and spreads through the skin. Possible exposure comes from workers who handle contaminated animal products and get spores in a cut or scrape on their skin. Infection develops in 1-7 days after exposure.
- **Inhalation** anthrax is the most deadly form of anthrax. This occurs when a person inhales spores that are aerosolized during the industrial processing of contaminated materials, such as wool, hides, or hair. Infection develops within a week after exposure, but it can take up to 2 months.
- **Gastrointestinal** anthrax is rarely reported in the US. People who eat raw or undercooked meat from infected animals could get sick with this. Infection develops from 1-7 days after exposure.
- *Injection* anthrax has never been reported in the US.

People at risk of anthrax infection are those who handle animal products, veterinarians, livestock producers, travelers, laboratory professionals, mail handlers, military personnel, and response workers. The anthrax vaccine is currently provided only to people who are at an increased risk of coming in contact with anthrax spores, such as members of the US military, certain laboratory workers, and some people who handle animals or animal products. The vaccine is not licensed for use in children under age 18, adults over age 65, or pregnant and nursing women.

We do not know when an Anthrax attack may occur; however, federal agencies have worked for years with health departments across the country to plan and prepare for an anthrax attack. Anthrax can be used as a weapon because spores are easily found in nature, can be produced easily, and can last a very long time in the environment. The spores cannot be seen, smelled, or tasted.

Ebola- is a rare viral hemorrhagic fever in humans and non-human primates. The virus starts between 2 days and up to 3 weeks after contracting the virus. Symptoms show up as a fever, sore throat, muscular pain, and headaches. Vomiting, diarrhea, and a rash may follow along with decreased function of the liver and kidneys. An infected person may bleed both internally and externally and are at a very high risk of death. Ebola results in death in between 25-90% of those infected. Death often occurs from low blood pressure due to loss of blood. The virus spreads through direct contact with body fluids, such as blood, urine, feces, semen, breast milk, sweat, and vomit. An Ebola vaccine is currently being studied in Africa with promising factors with nothing current in the US thus far. No specific treatment is singled out for Ebola; however, supporting treatments would be necessary such as intravenous fluids, pain management, anti-nausea, and fever control. If infected, recovery depends on the person's immune response. Ebola survivors may carry the illness in their blood for up to 10 years post-recovery.

Influenza – Influenza (flu) viruses can cause severe illness, even death. Younger and older populations, as well as populations with certain health conditions (asthma, COPD, heart disease, neurological disorders, blood disorders, endocrine disorders, kidney disorders, and weakened immune systems), are at a high risk of serious flu complications.

Flu viruses are grouped into three types, designated A, B, and C.

- Type A can affect both humans and other animals, and are associated with more severe illness. Usually the cause of global pandemics.
- Type B infect only humans and cause seasonal outbreaks and less severe disease than A in the United
 - States. Does not cause pandemics
- Type C Very common, usually causes mild respiratory symptoms.

The average incubation period (time between infection and onset of symptoms) for seasonal flu is TWO days. Flu symptoms are only passed from human to human by respiratory secretions. People infected with flu viruses may shed the virus and transmit the infection up to one day before the onset of symptoms. Viral shedding and the risk of transmission will be greatest during the first three to four days after the onset of symptoms.

Pandemic flu- A pandemic by definition is the worldwide spread of a new disease. An influenza pandemic occurs when a new influenza virus emerges and spreads around the world, and most people do not have immunity. Pandemics are able to infect people easily and move quickly from person to person.

Seasonal flu:	Pandemic flu:
Happens annually and peaks between December and February	Rarely happens: 3 times in 20 th century
Usually there is some immunity from previous exposures and influenza vaccines	Most people have little or no immunity because they have no previous exposure to the virus or similar viruses
Certain people are at risk for flu complications – elderly, infants, people with chronic health conditions	Even healthy people are at risk for serious complications
Health care providers can meet the needs of patients easily	Health care providers and hospitals are overwhelmed and it is very difficult to meet the needs of the exposed public
Vaccines are updated annually and one dose is sufficient	Although the US govt maintains a stockpile of pandemic vaccines, the overwhelming need of vaccines may not be available, and may require 2 doses
Usually cause minor impact on schools and the public; Sick people should stay home	May cause major impact on the general public; May cause travel restrictions, school and business closings
Antiviral drugs are readily available and help within the first 48 hours of presenting symptoms	Antiviral drugs will still be prescribed, but will be less readily available and more difficult to come by; Symptoms will also be more severe and antivirals may not be as helpful

Differences between seasonal influenza and pandemic influenza:

MERS (Middle East Respiratory Syndrome) – also known as the "camel flu" is a fairly new respiratory virus for humans. Symptoms include fever, cough, diarrhea, and shortness of breath. Some experience symptoms involving the gastrointestinal tract as well as causing nausea, vomiting, and diarrhea. Experts believe the virus is transmitted through respiratory droplets; however, this is still being studied. The incubation period is approximately 5-7 days. Mortality hits one-third of diagnosed cases. Spreading is uncommon outside of hospitals, thus the risk to the global community is fairly low. There have been no diagnosed cases in the US since 2014. There is no vaccine or treatment for MERS. **SARS (Severe Acute Respiratory Syndrome)** – is a severe respiratory illness that started in southern China. No cases have been diagnosed since 2004. Initial symptoms are flu-like muscle pain, high fever, sore throat, cough, severe muscle aches, and possible diarrhea. These symptoms may lead to shortness of breath and/or pneumonia. The incubation period is 4-6 days, although it has been known to incubate for only one day. The illness is transmitted through respiratory droplets, although there is some belief that SARS may be spread through airborne transmission – meaning spread by tiny pathogens in the air that is inhaled.



During an outbreak of a highly infectious illness, the US Government — **US Department** of Health and Human Services (HHS) along with the Centers of Disease Control (CDC) — is the national leader for overall communication and coordination efforts. If it is universal, these agencies work correspondingly with the World Health Organization (WHO).

US Department of Health and Human Services and CDC's role is to:

 Identify, appoint, and lead highly infectious disease responses. They will enact or modify legislation
and policies required to sustain and optimize pandemic preparedness, canacity

and policies required to sustain and optimize pandemic preparedness, capacity development, and response efforts across all sectors.

- Lead national and domestic efforts in surveillance and detection of outbreaks. This includes prioritizing and guiding the allocation and targeting of resources to achieve the goals as outlined in a country's response.
- Provide additional resources for national pandemic preparedness, capacity development, and response measures. Their efforts should support rapid containment of outbreaks and provide guidance to state-level authorities on the use and timing of community infection control measures.
- Support biomedical research and development of new vaccines and medical countermeasures.
- Consider providing resources and technical assistance to countries experiencing outbreaks of the highly infectious illness.

In Colorado, the **Colorado Department of Public Health and Environment (CDPHE)** takes lead from the CDC. CDPHE collaborates with local **County Health Departments to provide** **guidance and support for school districts including Re-3J**, to raise awareness and take actions that are necessary for a response that aligns with the severity of the phase of reported illness. The risks and potential health consequences are taken into consideration by CDPHE and local County Health Departments to assist Weld Re-3J in the following:

- Providing reliable information on the risk, severity, and progression of the outbreak and the effectiveness of interventions used during the outbreak.
- Activating the CDPHE Department Operations Center (DOC), and notify the Governor, the Governor's Expert Emergency Epidemic Response Committee (GEERC), and the Colorado Division of Homeland Security and Emergency Management. CDPHE will collaborate with response agencies in the State Emergency Operations Center to coordinate response activities.
- Prioritizing and continuing the provision of health-care during a highly infectious outbreak. These agencies will help maintain situational awareness by monitoring the highly infectious illness surveillance data and assessing the public health/medical needs of Colorado.
- Notifying the local health departments if social distancing and community mitigation is needed, such as closing schools, travel restrictions, cancellation of local public events, isolation, and/or quarantine which may be required to slow the spread of the illness.

Weld Re-3J Response to an Infectious Illness:

- The Superintendent, Assistant Superintendent, and Director of Operations will develop or revise plans through multi-agency collaboration to determine communication to district employees, students, families, and community members.
- School will remain in session until notified by local authorities for the need to close or guidance that suggests it is in the best interest for the safety of students and staff to close.
- District Registered Nurses (RNs) will continue to educate school communities on prevention of illness, vaccinations, proper hand washing techniques, community mitigation, and social mitigation for prevention of illness transmission. We will prepare the school communities to minimize health risks and train all staff and students on these measures.
- District RNs and district and school administration will develop plans for staff members and families in the event the staff member or a student must be sent home due to illness or if schools are closed.
- District administration will document a response plan along with the school Incident Commander (IC), the principal, or an appointed administrator.
- School administration will follow the communication plan in collaboration with the Superintendent's office, district health service providers, and external agencies.



Prepare-Prevent-Protect

Preparedness refers to those actions and measures taken before an event in order to better handle the emergency when it arises.

CDC plays a prevalent role in making sure states and local health departments are prepared for public health emergencies. **CDPHE** and **local County Health Departments** collaborate with Weld Re-3J public schools before, during, and after exposure to highly infectious illness and provide the most up-to-date information on community spread infection within a local context.

Public health officials recommend prevention and in the early phases of a pandemic or outbreak, to practice every day good health habits to prevent and protect the human population from the spread of a highly infectious illness. Every day good health habits include the following:

- Avoid close contact with people who are sick. When you are sick, stay away from others to prevent passing on your illness.
- Stay home if you are sick, and keep your children home if they are sick.
- Cover your mouth and nose using your inner elbow, sleeve, or tissue (not hands) when sneezing or coughing. Throw away the tissue and wash hands using proper hand washing procedures.
- In most circumstances, <u>"How Sick is Too Sick?</u>" guidance will be followed as defined by the Colorado Department of Public Health & Environment with the exception of some COVID-19 guidance below.
- Wash your hands after coughing or sneezing and often throughout the day. Washing the germs is always the best and the preferred method. If soap and water are not available, hand sanitizer will kill the viruses, but not wash them away. Please see CDC's hand washing protocols <u>here</u>.
- Frequently and thoroughly wash your hands with soap and water for at least 20 seconds. If soap and water are not available, use hand sanitizer with at least 60% alcohol.
- Avoid touching your eyes, nose, or mouth with unwashed hands. Germs are often spread by touching these body parts.
- Practice other good health strategies clean and disinfect surfaces in your home, especially when someone is ill. Get plenty of sleep, manage your stress, and be physically active.
- Do not share dishes, drinking glasses, cups, eating utensils, towels, or food with other people.
- Be prepared and informed take active participation in the event of an outbreak or

pandemic.



Respond

During confirmed cases of an outbreak/pandemic, Weld County School District Re-3J focuses on the response to and management of a confirmed case(s) through the following measures:

- The Superintendent, Assistant Superintendent, and District RN's will collaborate with CDPHE and local County Health Departments upon confirmation of a highly infectious illness of a staff member, student, or community member and follow their guidance for notification, safety, and cleaning processes and procedures, and if schools or classrooms need to close temporarily.
- Colorado has the legal authority to issue quarantine orders to people who were exposed to a contagious disease. If this were the case, communication would come directly from local Health Departments to Weld Re-3J.
- If indicated by CDPHE, **Personal Protective Equipment (PPE**) such as gloves or masks will be provided to appropriate staff and/or students. Instructions on this equipment for utilization and proper maintenance may involve the district RNs and other staff to assist in training and utilization of this equipment.
- Weld Re-3J will utilize CDPHE and local County Health Departments to address community mitigation measures specific to community containment interventions, such as **isolation and quarantine** during an outbreak/pandemic. Community containment interventions are implemented to help prevent or reduce the spread of an infectious agent(s) within the community.
- If voluntary home quarantine measures are suggested from local Health Departments for exposed household members, Weld Re-3J will communicate with staff, students, parents, and community members as a need to help mitigate the highly infectious illness.
- Depending on the severity of the event, Weld Re-3J will take direction from government officials including law enforcement, CDPHE, and County Health Departments for next steps.
- Weld Re-3J Schools will initiate data collection of student and staff absenteeism to report and collaborate with CDPHE in a proactive, positive manner to increase the health and safety of our community and to be able to best determine local trends and patterns. During a pandemic, attendance incentives or awards will not be utilized in order to help ensure health and safety guidance is followed.
- In any case, school personnel should isolate and seek emergency medical care immediately for any person showing any of these signs:
 - Trouble breathing

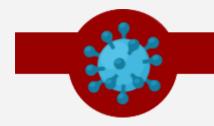
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face



Recover

It is critical for Weld Re-3J Schools to carry out guidance for all staff, students, parents, and community members with a focus on "getting back on track." Returning to normal practice and procedures is essential for the health and safety of everyone. Our goal is that those affected by the pandemic or outbreak return as quickly as possible to normally scheduled school days including all scheduled events. To help ensure this happens, the district will take the following actions:

- All school grounds and property will be cleaned and equipment may need to be sterilized in accordance with guidance from CDC and CDPHE.
- Work with CDPHE and local County Health Departments to communicate when it is safe to return to school and what precautions, if any, will need to occur.
- Assess the need for additional mental health support resources and provide as much support as possible. The District Mental Health Team will help identify mental health resources for the school and community.
- Debriefs with CDPHE and local County Health Departments will occur post-event to ensure adequate data collection was successful and to review and revise proper preparation and planning for the next highly infectious disease outbreak/pandemic.
- Establish guidance and expectations to help students who have missed several days of instruction get back on track. Some assignments may need to be eliminated depending on a student's performance on content mastery.



COVID-19 (Coronavirus)

COVID-19 is a disease caused by a virus called SARS-CoV-2. Most people with COVID-19 have mild <u>symptoms</u>, but some people can become severely ill. Although most people with COVID-19 get better within weeks of illness, some people experience post-COVID conditions. Post-COVID conditions are a wide range of new, returning, or ongoing health problems

people can experience more than four weeks after first being infected with the virus that causes COVID-19. Older people and those who have <u>certain underlying medical conditions</u> are more likely to get severely ill from COVID-19. <u>Vaccines</u> against COVID-19 are safe and effective.

How Does the Virus Spread?

COVID-19 spreads when an infected person breathes out droplets and very small particles that contain the virus. These droplets and particles can be breathed in by other people or land on their eyes, noses, or mouth. In some circumstances, they may contaminate surfaces they touch. People who are closer than 6 feet from the infected person are most likely to get infected.

COVID-19 is spread in three main ways:

- Breathing in air when close to an infected person who is exhaling small droplets and particles that contain the virus.
- Having these small droplets and particles that contain viruses land on the eyes, nose, or mouth, especially through splashes and sprays like a cough or sneeze.

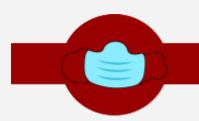
Layered Prevention Strategies

• Touching eyes, nose, or mouth with hands that have the virus on them.

Protecting Yourself and Others

- Frequently and thoroughly wash your hands with soap and water for at least 20 seconds. If soap and water are not available, use hand sanitizer with at least 60% alcohol.
- Cover coughs and sneezes using your inner elbow and wash your hands immediately after. Do not remove your mask to sneeze or cough.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Stay home and self-isolate if you're sick, and keep your children home if they are sick.
- Regularly disinfect workspaces and other high touch areas frequently with district-provided products including steering wheels, tools, keyboard and mouse, door knobs/handles, phones, copiers, and printers.

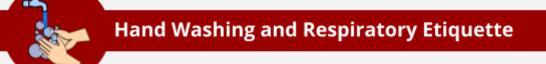
Visit the <u>How to Protect Yourself & Others</u> page to learn about how to protect yourself from respiratory illnesses, like COVID-19.



Universal and Correct Use of Masks

Both state and local public health have the authority to issue public health orders requiring masks, and include within those orders any allowable exceptions to the mask requirement. In addition, even when not required by local public health or a school district, staff and students may choose to wear masks. Schools and school districts should ensure that every classroom is a welcome environment for students and staff who choose to protect themselves in this manner.

Under most circumstances, Weld Re-3J school staff and students are not required to wear masks or face coverings. All cloth face coverings must be in compliance with staff and student dress codes as outlined in Board policies GB-6 (<u>GBEBA</u>) and J-19 (<u>JICA</u>) respectively.



Hand washing is one of the most effective ways to control the spread of disease. Hands should be washed using soap and water. After soap is applied, the hands should be scrubbed for at least 20 seconds, paying close attention to all surfaces including nails and between fingers. The use of hand sanitizer is temporary; hands should be washed with soap and water as soon as it is available.

- Frequent hand washing opportunities will be provided along with instruction on proper hand washing techniques. Hand sanitizer (with at least 60% alcohol) will be provided for use until hands can be washed with soap and water.
- Hand washing/sanitizing will be done at regular intervals throughout the day, especially:
 - Before and after using the bathroom
 - After sneezing, coughing, or blowing your nose
 - Before and after preparing food
 - Before and after eating or drinking
 - Before and after assisting students with feeding and toileting or diapering
 - Before and after the administration of medication or medical procedures
 - Before putting on and after taking off personal protective equipment

- After caring for any student, especially those with nose, mouth, eye or ear discharge or drainage and before initiating contact with another student
- After contact with blood, body fluids, secretions and excretions
- Before handling contact lenses or cosmetics
- After touching face covering
- Students are encouraged to bring their own water bottles each day with their name clearly labeled. Water fountains will not be operational but water filling stations will.

When and How to Wash Your Hands | Handwashing (General hand washing guidance)
Handwashing Video (3 minutes)
Handwashing Video for Children (30 seconds)

Cover Coughs and Sneezes

- If you are wearing a mask: You can cough or sneeze into your mask. Put on a new, clean mask as soon as possible and wash your hands.
- If you are not wearing a mask:
 - Always cover your mouth and nose with a tissue when you cough or sneeze, or use the inside of your elbow and do not spit.
 - Throw used tissues in the trash.
- Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.



Cleaning and Maintaining Healthy Facilities

This guidance is based on what is currently known about the <u>transmission</u> of SARS-CoV-2, the virus that causes <u>coronavirus disease 2019 (COVID-19</u>). COVID-19 is a respiratory illness that can spread from person to person, especially between people who are physically near each other (within about 6 feet). People who are infected but do not show symptoms can also spread the virus to others.

Protocols such as cleaning and sanitizing will remain a significant component of the district's response to limit transmission; however, based on CDC guidance, in most circumstances sanitizing once per day is sufficient for removing viruses from surfaces.

The following protocols will continue to be implemented across all district facilities:

• All frequently touched surfaces, including but not limited to doors, door handles, countertops, desks, sinks, light switches, etc. will be cleaned and

disinfected daily.

- Disinfectant fogging will be used daily in all communal areas including:
 - Classrooms
 - Restrooms
 - Office areas
 - Gymnasium
 - Health office
 - Media center
- Daily routine cleaning and disinfection of all school buses.
 - Daily disinfectant fogging
 - Bus handles and handrails and seats wiped
 - \circ $\;$ Bus floors swept and wet mopped with disinfectant cleaner $\;$
- All rooms throughout the school disinfected nightly with additional cleaning protocols.
- Restroom facilities will be disinfected at least twice per day.
- Students will routinely be asked to participate in keeping spaces sanitized by wiping tables/desks, etc.

Procedures for Minimizing the Spread of Illness on Technology Devices

For grades K-12 with individual chromebooks

- Students are encouraged to use hand sanitizing gel before and after using their devices.
- Students should not use Clorox wipes or other cleaning products without proper instructions.
- Specific **instructions** for cleaning classroom electronic devices should be followed when appropriate (e.g., a device has specifically been infected through coughing or sneezing).



Ventilation and Indoor Air Quality

CDC guidance recommends increasing outdoor airflow into classrooms and ensuring that classrooms are well ventilated in order to reduce the spread of COVID-19. In all Weld Re-3J Elementary Schools, district personnel have the capability to bring in and adjust the outside air flow using automated control systems. This, in conjunction with operable/opening windows, allows for sufficiently circulating airflow on a consistent basis.

Weld Central High School and Weld Central Middle School do not have operable windows, and the outdoor airflow into the HVAC systems is less controllable by district personnel. To mitigate the reduced ability to increase outdoor airflow, the district has installed individual air filtration units to continuously clean the air within classrooms.



Protocols for Communal Spaces

Classrooms

- Increase airflow in the classroom as much as possible by opening windows or interior doors. Do not open exterior doors or bring in personal items such as fans to circulate air.
- Keep each child's belongings separated from others' and in individually labeled containers, cubbies, or areas.
- Provide adequate supplies to minimize sharing of high touch materials to the extent possible (art supplies, equipment, etc.).

Hallways

• As appropriate, implement staggering passing periods by cohorts in grade level or by class to avoid large groups gathering together.

Restrooms

- Soap and single service towels shall be available for all lavatory facilities, except that mechanical warm air dryers may be used in lieu of towels.
- Display signage in the restrooms illustrating proper hand washing and hygiene.
- Ensure adequate soap is available.

Health Room

• An isolated health room/area for students and staff exhibiting<u>COVID-19 signs and</u> <u>symptoms</u> will be established.



Symptoms of COVID-19 and When to Stay Home

People with COVID-19 have a wide range of reported symptoms – from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus that causes COVID-19.

CDPHE has provided an <u>"At-Home Screening Tool"</u> for employees, parents, and students to determine when they need to stay home. This symptom checklist refers only to new symptoms or a change in usual symptoms. A student/staff should not be kept home for usual symptoms they experience due to a chronic condition unless they are worse than usual. These guidelines are in addition to regular school guidance and requirements. In some instances, people who have completed COVID-19 vaccine series or would be considered immune or protected may not need to quarantine after a known exposure or close contact in accordance with <u>Who Needs to Quarantine</u>.

Positive COVID Cases

All positive cases will be required to isolate and stay home for at least five days to protect others, pursuant to statutory and regulatory public health authority. Once a school has an outbreak that impacts multiple classrooms, school leadership and District RNs will work with local public health authorities to determine what additional mitigation strategies may be necessary. Additional mitigation strategies may include: universal masking indoors, distancing, testing and contact tracing, and quarantine. Persons returning to school on days 6-10 following isolation or quarantine must wear a well-fitting mask over the mouth and nose while at school or around others. Anyone unable to wear a well-fitting mask over their mouth and nose should complete a full 10 days of isolation or quarantine.



Isolation and Quarantine Guidelines

Isolation

If you have any COVID-19 symptoms or you have tested positive, you should isolate, even if vaccinated. *Isolation* means staying home from work, school, and activities when a person is sick or diagnosed with COVID-19 and relates to the behavior after a confirmed infection. You can stop isolating after five full full days if:

- You tested positive, but don't have any symptoms.
- You had mild symptoms, you are starting to feel better, and have been fever free without the use of fever-reducing medication for 24 hours.

Your first day of isolation is the first full day after you started feeling symptoms or tested positive. Individuals who are able to stop isolating after five days, must continue taking precautions for five more days.

• Wear a well fitted mask around other people

- Avoid eating and drinking around other people when possible.
- Avoid contact with people who are at high risk for getting very sick from COVID-19.

Ensuring sick people stay home (and people with COVID-19 follow <u>isolation requirements</u>, regardless of vaccination status) is critical to preventing the spread of COVID-19. Under state law, isolation of positive cases is required and must be enforced by local public health and school districts.

Quarantine

Quarantine refers to the time following exposure to the virus or close contact with someone known to have COVID-19. During quarantine people are expected to stay home from work, school, and/or activities. Find <u>guidance on how to quarantine and how long quarantine lasts</u>. A person should not attend work, school, or out of school activities if they are under quarantine following an exposure in school. If a person develops symptoms of COVID-19 during their quarantine period, they should begin isolation.

Who Needs to Quarantine?

People who need to quarantine after exposure include:

- People who are not vaccinated.
- People who are not <u>up to date with recommended vaccine doses</u>, including third doses when eligible.
 - Note: In schools only, students aged 12+ and staff who have completed their primary vaccine series and are due for a third dose but have not received one will be exempt from quarantining until February 1, 2022. After that date, they will need to be fully up to date with all recommended vaccine doses to be exempt from quarantining.

For individuals who must quarantine, they should stay home for five days after their exposure to COVID-19. The first day of quarantine is the first full day following exposure. Those who have tested positive must wear a <u>well-fitted</u> mask around others in their home if they aren't able to remain completely separate during quarantine and in public for five additional days. When there is a probable or confirmed case of COVID in a household, siblings, spouses, and other household contacts must quarantine in compliance with CDPHE and CDC guidance.

The quarantine period for family members and children in the household with a positive COVID case will begin on the last day of exposure to the person with COVID-19 during their 5-day isolation period. This means that if the positive person is not able to completely isolate from other family members, the duration of quarantine for household contacts will be 10 to 20 days (5-day isolation + additional quarantine period required for all exposed parties beginning on the last day of isolation).

People who don't need to quarantine after exposure include:

• People who are <u>up to date with all recommended vaccine doses</u>.

- Note: In schools only, students aged 12+ and staff who have completed their primary vaccine series and are due for a third dose but have not received one will be exempt from quarantining until February 1, 2022. After that date, they will need to be fully up to date with all recommended vaccine doses to be exempt from quarantining.
- People who have tested positive for COVID-19 (with a viral test, not an antibody test) within the past 90 days.

Individuals who were exposed but don't need to quarantine, should still wear a well-fitted mask around others for 10 days and avoid high risk people and settings. If individuals who were exposed start to feel symptoms in the 10 days after exposure, it is recommended they get tested immediately and start isolating.

Quarantine for Routine Classroom Exposures

The state recommends counties, schools, and individuals that meet certain community metrics shift to a transmission control strategy, with quarantine not required for routine classroom exposures. Large outbreaks or important circulating variants may necessitate more stringent disease control strategies at the discretion of the local public health agency (LPHA).

Weld Re-3J will follow CDPHE and CDC's guidance on "<u>Addressing Symptoms at School</u>" and/or consult with local health officials for employees and students who feel ill after arriving at school.



Extracurricular Activities and Athletics

Weld Re-3J will follow all guidelines, requirements, and season adjustments provided by the Colorado High School Activities Association (CHSAA) and the recommendations from the National Federation of High Schools (NFHS) regarding team sports and activities. Certain activities may be canceled by administration based on current guidelines or recommendations.



Clinical labs and/or health care providers are required to report cases to public health. Schools are able to disclose information to public health without prior written consent under FERPA's health or safety emergency exception, because a person with COVID-19 represents a potential threat to the health and safety of others at the school. This is true even if there is not an outbreak.



Information for Employees

Employee Absences

- Teachers will be expected to prepare emergency lesson plans in advance in case they are out due to unexpected illness or absence.
- Long term absences due to illness, isolation, or quarantine will be coordinated at the building level with staff and administration.
- Employee sick leave will need to be used for all symptoms and/or illness. If you or someone in your immediate household has received a positive COVID-19 test, please contact the Human Resources Department at 303-536-2055.
- Employees or students who are experiencing symptoms they believe are due to seasonal allergies or asthma must be approved by one of our District Nurses to attend while symptomatic. Without District Nurse approval, employees or children with any COVID-19 symptoms will need to follow the same *stay at home* and *isolation and quarantine* guidelines as specified in this document.

Medical Emergency Response

- In any case, school personnel should seek emergency medical care immediately for any person showing any of these signs:
 - Trouble breathing
 - Persistent pain or pressure in the chest
 - New confusion
 - Inability to wake or stay awake
 - Bluish lips or face

Employee Resources:

Staff should refer to the <u>"At-home Symptom Screening Tool"</u> to determine when they need to stay home. See CDPHE's <u>"Addressing Symptoms at School"</u> for guidance when employees feel ill after reporting to work. Find <u>guidance on how to quarantine and how long quarantine</u> <u>lasts.</u>

Confidentiality

All information related to employee or student personal health is strictly confidential. The Federal Educational Record Privacy Act (FERPA) protects all student educational and health information. The Health Information Portability Accountability Act (HIPAA) protects all individual health information.

All Weld Re-3J employees must refrain from releasing personally identifiable information. All Weld Re-3J staff and families are expected to use discretion when sharing information about staff, students, or student's families. If you have questions about what can be shared, please contact your supervisor or building principal.

COVID-19 is a reportable condition to the CO Department of Public Health. All reporting will be done in collaboration with the Assistant Superintendent and District School Nurses. Public health authorities require this information in order to mitigate the spread of communicable disease. FERPA and HIPAA allow for this information to be shared.

Schools and child care providers are required to report all outbreaks to their local public health agency or CDPHE within four hours per statute.

Schools and child care providers must report both suspected and confirmed outbreaks. Schools and child care providers can report outbreaks by:

- Fill out the CDPHE COVID-19 outbreak report form and send it to the local public health agency (via <u>web form</u> or emailing the <u>PDF form</u>).
- Calling their local public health agency.
- Call CDPHE at 303-692-2700.



Response to Community Needs

Communications Related to COVID-19

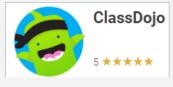
Clear, proactive, intentional two-way communication with staff, families, and our community is essential. Weld Re-3J will provide as-needed communications about what we know and don't know to help keep students, staff, and families stay informed. Staff and families can expect communication through the following outlets:

- Email
- Phone messages

- Text
- Class Dojo (Grades PK-5)
- Remind App (Grades 6-12)
- Weekly Newsletters from Principals

The District utilizes the SchoolMessenger system to deliver messages via phone, email, and text to keep parents and guardians informed. You are encouraged to sign up to receive all forms of messaging, including text messages. You can participate in this free service just by sending a text message of "Yes" to 67587. School messenger information <u>SMS Text Opt-In Flyer</u>

Communication should come directly from school principals and teachers. For families with students in grades PK-5, we ask families to use the Class Dojo mobile application as a way to get information quickly and easily. For families with students in grades 6-12, we will be using the Remind application.



Download information for iphone or android.



Account set up and information is available <u>HERE</u>.

Translation Services

Per U.S. Department of Education, schools must communicate information to limited English proficient parents in a language they can understand about any program, service, or activity that is called to the attention of parents who are proficient in English. This includes, but is not limited to, information related to:

- registration and enrollment in school and school programs grievance procedures and notices of nondiscrimination
- language assistance programs
- parent handbooks
- report cards
- gifted and talented programs
- student discipline policies and procedures
- magnet and charter schools
- parent-teacher conferences
- requests for parent permission for student participation in school activities
- special education and related services, and
- meetings to discuss special education

For more information about school's legal responsibilities, please visit: <u>https://www2.ed.gov/about/offices/list/ocr/docs/dcl-factsheet-lep-parents-201501.pdf</u> Interpreter services are available for all staff and families through <u>Heartland Alliance</u>.

Providing Resources

- Use <u>United Way's 2-1-1</u> to help meet the current educational and basic needs of students and their families.
- It is important that students and staff feel safe in whatever remote platform, communication tool, etc. is being used.
- Monitor cyberbullying and create a space for reporting of harassment and bullying.
 - <u>Coronavirus, Online Learning, Social Isolation and Cyberbullying: How to</u> <u>Support Our Students</u>
 - <u>Colorado Crisis Services offers free, confidential, professional, 24/7</u> <u>support.</u>
 - Call 1-844-493-8255
 - Text "TALK" to 38255
 - The Disaster Distress Helpline offers help and support for any distress you or someone you care about may be feeling related to a disaster.
 - Call 1-800-985-5990
 - Text 'TalkWithUs' to 66746
 - TTY for Deaf / Hard of Hearing: 1-800-846-8517
 - Spanish-speakers: Text "Hablanos" to 66746

Community Coronavirus Resources

<u>CDPHE: Coronavirus Disease</u> <u>CDC: Coronavirus</u> <u>Resources for Families Impacted by COVID-19</u> <u>2-1-1 Colorado</u> Second Wind Fund

Bibliography

<u>CDPHE Practical Guide for Operationalizing CDC's School Guidance</u> <u>Centers for Disease Control and Prevention Work & School</u> <u>Centers for Disease Control Guidance for COVID-19 Prevention in K-12 Schools</u> <u>Colorado Department of Education COVID-19 Resources for Schools</u>